## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000024411

Entity Name: DONALD C. WEDEMEYER M.D., P.A.

FILED Apr 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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4202 E. FOWLER AVE., USF 30304 5701 N. FLORIDA AVE. TAMPA, FL 33620 TAMPA, FL 33604

Current Mailing Address: New Mailing Address:

4202 E. FOWLER AVE., USF 30304 30304 HOLLY DRIVE USF TAMPA, FL 33620 TAMPA, FL 33620

FEI Number: 30-0059801 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEDEMEYER, DONALD 814 W. HOLLYWOOD ST. TAMPA, FL 33604 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: WEDEMEYER, DONALD C Name: WEDEMEYER, DONALD C

VVEDEMEYER, DONALD C
4202 E. FOWLER AVE., USF 30304
Address: 30304 HOLLY DRIVE USF
TAMPA, FL 33620
City-St-Zip: TAMPA, FL 33620

City-St-Zip: TAMPA, FL 33620 City-St-Zip: TAMPA, F

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONALD C. WEDEMEYER D 04/18/2007