


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2008 8:00 am
Secretary of State

04-15-2008 90025 025 ***150.00

DOCUMENT # P02000053796			
1. Entity Name ANGELA ACEVEDO MD PA			
Principal Place of Business 6691 MERRYVALE LANE PORT ORANGE, FL 32128		Mailing Address 6691 MERRYVALE LANE PORT ORANGE, FL 32128	
2. Principal Place of Business - No P.O. Box # 6202 W. CORPORATE OAKS DR.		3. Mailing Address SAME	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State CRYSTAL RIVER FL		City & State	
Zip 34429	Country USA	Zip	Country
6. Name and Address of Current Registered Agent DENNIS M BISHOP CPA 8085 OVERSEAS HIGHWAY MARATHON, FL 33050		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT SAENZ-ACEVEDO, ANGELA 6691 MERRYVALE LANE PORT ORANGE, FL 32128 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6202 W. CORPORATE OAKS DR CRYSTAL RIVER FL 34429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ACEVEDO, JORGE 6691 MERRYVALE LANE PORT ORAGNE, FL 32128 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6202 W. CORPORATE OAKS DR CRYSTAL RIVER FL 34429
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04042008 Chg-P CR2E034 (12/06)

4. FEI Number 03-0446429 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Angela Acevedo* 4-6-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #