## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000068257

Entity Name: BRANDON HEALTH MANAGEMENT, INC.

2328 VALRICO FOREST DRIVE

VALRICO, FL 33594

Address: City-St-Zip: FILED Mar 30, 2005 Secretary of State

•		· · · · · · · · · · · · · · · · · · ·			
Current P	rincipal Place	of Business:	New Principal Place of Business:		
9270 BAY	PLAZA BLVD.				
STE 620 TAMPA, F	I 33619				
			New Mailing Address		
Current W	lailing Addres	·5.	New Mailing Address	•	
9270 BAY STE 620 TAMPA, F	PLAZA BLVD.				
	: 30-0088362	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:		
TAMPA, F The above	FĹOWER DRI\ L 33647 US		ourpose of changing its registered	office or registered agent, or both,	
SIGNATUI		ic Signature of Registered Age	ant	Date	
			5111	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () HUBSMITH, LIN 9251 DAYFLOW TAMPA, FL 330	VER DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () CHIARAMONTE 2505 MILLER V VALRICO, FL 3	VOOD COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D () UMBERGER, JI	Delete JLIE	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: JULIE UMBERGER D 03/30/2005