

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068257

FILED  
Mar 11, 2008  
Secretary of State

Entity Name: BRANDON HEALTH MANAGEMENT, INC.

## Current Principal Place of Business:

9270 BAY PLAZA BLVD.  
STE 620  
TAMPA, FL 33619

## New Principal Place of Business:

## Current Mailing Address:

9270 BAY PLAZA BLVD.  
STE 620  
TAMPA, FL 33619

## New Mailing Address:

FEI Number: 30-0088362      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUBSMITH, LINDA  
9251 DAYFLOWER DRIVE  
TAMPA, FL 33647      US

## Name and Address of New Registered Agent:

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:

Title: D ( ) Delete  
Name: HUBSMITH, LINDA  
Address: 9251 DAYFLOWER DRIVE  
City-St-Zip: TAMPA, FL 33647

Title: D ( ) Delete  
Name: CHIARAMONTE, JOSEPH  
Address: 2505 MILLER WOOD COURT  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: UMBERGER, JULIE  
Address: 2328 VALRICO FOREST DRIVE  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JULIE UMBERGER

DIR

03/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date