

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000072222

FILED
Apr 10, 2007
Secretary of State

Entity Name: DAVID S. ROTHBERG, M.D., P.A.

Current Principal Place of Business:

3820 TAMPA RD
SUITE 101
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

3820 TAMPA RD
SUITE 101
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 04-3653652 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTHBERG, DAVID S M.D.
3820 TAMPA RD
SUITE 101
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

ROTHBERG, DAVID S M.D.
3820 TAMPA RD
SUITE 101
PALM HARBOR, FL, FL 34684 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: DAVID ROTHBERG, MD

04/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: ROTHBERG, DAVID S M.D.
Address: 3820 TAMPA RD STE 101
City-St-Zip: PALM HARBOR, FL 34684

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ROTHBERG, MD, DAVID S
Address: 3820 TAMPA RD SUITE 101
City-St-Zip: PALM HARBOR, FL 34684

Title: PRES () Change (X) Addition
Name: ROTHBERG, MD, DAVID
Address: 3820 TAMPA RD SUITE 101
City-St-Zip: PALM HARBOR, FL 34684

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Address: 3820 TAMPA RD SUITE 101
City-St-Zip: PALM HARBOR, FL 34684

Title: PRES () Change (X) Addition
Name: ROTHBERG, MD, DAVID
Address: 3820 TAMPA RD SUITE 101
City-St-Zip: PALM HARBOR, FL 34684

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: DAVID ROTHBERG, MD

PRES

04/10/2007

Electronic Signature of Signing Officer or Director

Date