2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075991

Entity Name: DANA MEDICAL CENTER INC.

FILED Jan 03, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1947 W. M TAMPA, F	IARTIN L. KIN L 33607	G BLVD.			
Current Mailing Address:			New Mailing Address:		
1947 W. M TAMPA, F	IARTIN L. KIN L 33607	G BLVD.			
FEI Number: 04-3682799 FEI Nun		FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DIAZ, ANG 3312 WES TAMPA, FI	T AILEEN ST	8			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (DIAZ, ANGEL 3312 WEST AI TAMPA, FL 33		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (DIAZ, DANAI 3312 WEST AI TAMPA, FL 33		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ANGEL DIAZ P 01/03/2007