

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000091051

FILED
Jan 29, 2009
Secretary of State

Entity Name: PINELLAS ARRHYTHMIA ASSOCIATES, P.A.

Current Principal Place of Business:

1345 WEST BAY DRIVE
SUITE 405
LARGO, FL 33770

New Principal Place of Business:

516 LAKEVIEW ROAD
VILLA 5
CLEARWATER, FL 33756

Current Mailing Address:

1345 WEST BAY DRIVE
SUITE 405
LARGO, FL 33770

New Mailing Address:

516 LAKEVIEW ROAD
VILLA 5
CLEARWATER, FL 33756

FEI Number: 30-0105031

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORRIS, JOHN F M D
1345 WEST BAY DRIVE
SUITE 405
LARGO, FL 33770 US

Name and Address of New Registered Agent:

NORRIS, JOHN F M D
516 LAKEVIEW ROAD
VILLA 5
CLEARWATER, FL 33756 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: _____

01/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: NORRIS, JOHN F M D
Address: 1345 WEST BAY DRIVE
City-St-Zip: LARGO, FL 33770

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: NORRIS, JOHN F M D
Address: 516 LAKEVIEW ROAD VILLA 5
City-St-Zip: CLEARWATER, FL 33756

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: JOHN F NORRIS

PSDT

01/29/2009

Electronic Signature of Signing Officer or Director

Date