## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000134369

Entity Name: PATIENTREE, INC.

FILED Apr 27, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9625 WES KEARNEY WAY 5115 JOANNE KEARNEY BLVD. RIVERVIEW, FL 33569 TAMPA, FL 33619 **Current Mailing Address: New Mailing Address:** 9625 WES KEARNEY WAY 5115 JOANNE KEARNEY BLVD. RIVERVIEW, FL 33569 TAMPA, FL 33619 FEI Number: 54-2101013 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: LETZEISEN, ROBERT B 10845 BARBADOS ISLE DRIVE TAMPA, FL 33647 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition LETZEISEN, ROBERT Name: Name: 10845 BARBADOS ISLE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33647 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: ROBERT LETZEISEN PTD 04/27/2007