2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000007215

Entity Name: THOMAS J. CARPENTER, D.O., P.A.

FILED Jul 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7600 BRYAN DAIRY RD, STE E 7600 BRYAN DAIRY RD LARGO, FL 33777 SUITE E

LARGO, FL 33777

Current Mailing Address: New Mailing Address:

7600 BRYAN DAIRY RD, STE E 7600 BRYAN DAIRY RD LARGO, FL 33777 SUITE E

LARGO, FL 33777

FEI Number: 04-3735193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POWELL, KIMBER
7020 40TH AVENUE NORTH
ST PETE, FL 33709 US

GEORGE, KIMBER L MBA
7020 40TH AVENUE NORTH
ST PETE, FL 33709 US

ST PETE, FL 33709 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: KIMBER LYNN GEORGE 07/21/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. () Delete Title: () Change () Addition Name: CARPENTER, THOMAS J D.O. Name:

 Name:
 CARPENTER, THOMAS J D.O.
 Name:

 Address:
 7600 BRYAN DAIRY RD, STE E
 Address:

 City-St-Zip:
 LARGO, FL 33777
 City-St-Zip:

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: THOMAS J CARPENTER, DO, DIP AOBFP-RECERTIF DR. 07/21/2006