

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071421

Entity Name: JOHN T. LITTELL, M.D., P.A.

FILED  
Mar 12, 2007  
Secretary of State

## Current Principal Place of Business:

203 PARK PLACE BLVD  
KISSIMMEE, FL 34741

## New Principal Place of Business:

300 PARK PLACE BLVD  
KISSIMMEE, FL 34741

## Current Mailing Address:

203 PARK PLACE BLVD  
KISSIMMEE, FL 34741

## New Mailing Address:

300 PARK PLACE BLVD  
KISSIMMEE, FL 34741

FEI Number: 77-0602041

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LITTELL, JOHN T  
203 PARK PLACE BLVD  
KISSIMMEE, FL 34741 US

## Name and Address of New Registered Agent:

LITTELL, JOHN T  
300 PARK PLACE BLVD  
KISSIMMEE, FL 34741 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:

03/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LITTELL, JOHN T  
Address: 203 PARK PLACE BLVD  
City-St-Zip: KISSIMMEE, FL 34741

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LITTELL, JOHN T  
Address: 300 PARK PLACE BLVD  
City-St-Zip: KISSIMMEE, FL 34741

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: JOHN T LITTELL

PRES

03/12/2007

Electronic Signature of Signing Officer or Director

Date