

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075881

FILED
Apr 13, 2005
Secretary of State

Entity Name: GALO CONSTANTE, M.D., P.A.

Current Principal Place of Business:

13685 DOCTOR'S WAY
SUITE 140B
FORT MYERS, FL 339124337

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 60533
FORT MYERS, FL 339066533

New Mailing Address:

FEI Number: 20-0082575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONSTANTE, GALO
13685 DOCTOR'S WAY
SUITE 140B
FORT MYERS, FL 339124337 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: CONSTANTE, GALO
Address: 13685 DOCTOR'S WAY, SUITE 140B
City-St-Zip: FORT MYERS, FL 339124337

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CONSTANTE GALO

D

04/13/2005

Electronic Signature of Signing Officer or Director

Date