

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000107651

FILED  
Jan 24, 2005  
Secretary of State

Entity Name: ARTHUR L. CLEMENTE, M.D., P.A.

## Current Principal Place of Business:

405 MONTEREY BLVD NE  
ST PETERSBURG, FL 33704

## New Principal Place of Business:

100 4TH AVE SOUTH  
231  
ST PETERSBURG, FL 33701

## Current Mailing Address:

405 MONTEREY BLVD NE  
ST PETERSBURG, FL 33704

## New Mailing Address:

100 4TH AVE SOUTH  
231  
ST PETERSBURG, FL 33701

FEI Number: 20-1393517

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CLEMENTE, ARTHUR L  
405 MONTEREY BLVD NE  
ST PETERSBURG, FL 33704 US

## Name and Address of New Registered Agent:

CLEMENTE, ARTHUR L  
100 4TH AVE SOUTH  
ST PETERSBURG, FL 33701 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: ARTHUR L CLEMENTE

01/24/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CLEMENTE, ARTHUR L  
Address: 405 MONTEREY BLVD NE  
City-St-Zip: ST PETERSBURG, FL 33704

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CLEMENTE, ARTHUR L  
Address: 100 4TH AVE SOUTH APT 231  
City-St-Zip: ST PETERSBURG, FL 33701

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: ARTHUR L CLEMENTE

DR

01/24/2005

Electronic Signature of Signing Officer or Director

Date