2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000164228

1. Entity Name
PAMELA S. DOLBER, DPM, P.A.

60018490

Principal Place of Business	Mailing Address
4126 LORETTO AVE	4126 LORETTO AVE
SEBRING, FL 33872	SEBRING, FL 33872

DO NOT WRITE IN THIS SPACE

01042007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
54-2164865	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DOLBER, PAMELA S
4126 LORETTO AVE
SEBRING, FL 33872

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE	D	
NAME	DOLBER, PAMELA S	
STREET ADDRESS	4126 LORETTO AVE	
CITY-ST-ZIP	SEBRING, FL 33872	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____   1/30/07 863-699-0710

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

Pamela S. Dolber