2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED **ANNUAL REPORT** Aug 02, 2007 08:00 AN Secretary of State DOCUMENT # P04000169403 1. Entity Name DONNA C. CONNOLLY, CRNA, PA Principal Place of Business Mailing Address 4409 HOFFNER AVENUE 4409 HOFFNER AVENUE STE 328 STE 328 ORLANDO, FL 32812 ORLANDO, FL 32812 US 07302007 No Chg-P GR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2019001 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CONNOLLY II, JOSEPH F DO NOT WRITE 4409 HOFFNER AVE. **SUITE 327** IN THIS SPACE ORLANDO, FL 32812 8. The above named entity submite 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 stansture required when reinstaling) FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 10. OFFICERS AND DIRECTORS PRES TITLE NAME CONNOLLY, DONNA C STREET ADDRESS 4409 HOFFNER AVE, STE 328 CITY-ST-ZIP ORLANDO, FL 32812 U00000771221 TITLE NAME CONNOLLY, JOSEPH F II STREET ADDRESS 4409 HOFFNER AVE, STE 327 CITY-ST-7IP ORLANDO, FL 32812 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZP THILE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify 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.

RESIDENT 29 July 2007

Total Like Connection

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