

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037956

FILED
Feb 01, 2007
Secretary of State

Entity Name: BAY AREA ALLERGY AND ASTHMA CONSULTANTS, P.A.

Current Principal Place of Business:

5741 BEE RIDGE ROAD
SUITE 500
SARASOTA, FL 34233 US

New Principal Place of Business:

2088 HAWTHORNE STREET
SARASOTA, FL 34239 US

Current Mailing Address:

5741 BEE RIDGE ROAD
SUITE 500
SARASOTA, FL 34233 US

New Mailing Address:

2088 HAWTHORNE STREET
SARASOTA, FL 34239 US

FEI Number: 20-2478375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERKES, EVA A
5741 BEE RIDGE ROAD
SUITE 500
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

BERKES, EVA A
2088 HAWTHORNE STREET
SARASOTA, FL 34239 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:

02/01/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BERKES, EVA A
Address: 5741 BEE RIDGE, STE. 500
City-St-Zip: SARASOTA, FL 34233 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BERKES, EVA A
Address: 2088 HAWTHORNE STREET
City-St-Zip: SARASOTA, FL 34239 US

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: EVA A. BERKES

PSDT

02/01/2007

Electronic Signature of Signing Officer or Director

Date