

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000090589

FILED  
Jan 25, 2008  
Secretary of State

Entity Name: PARTNERSHIP MEDICAL INCORPORATED

## Current Principal Place of Business:

2147 PORTER LAKE DRIVE  
UNIT F  
BRADENTON, FL 34240

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 212104  
AUGUSTA, GA 30917 US

## New Mailing Address:

FEI Number: 20-5104194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLOAN, JOHN C  
7417 VISTA WAY NO 205  
BRADENTON, FL 34202 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: DVT ( ) Delete  
Name: SLOAN, JOHN C  
Address: 7417 VISTA WAY NO 205  
City-St-Zip: BRADENTON, FL 34202

Title: DP ( ) Delete  
Name: ITURRIAGA, JR., MAX F  
Address: 1700 PINE BAY DRIVE  
City-St-Zip: LAKE MARY, FL 32749

Title: S ( ) Delete  
Name: YOUNG, ELIZABETH  
Address: 428 CREEKWALK DRIVE  
City-St-Zip: MARTINEZ, GA 30907

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: YOUNG, ELIZABETH C  
Address: 428 CREEKWALK DRIVE  
City-St-Zip: MARTINEZ, GA 30907

I hereby certify that the information supplied with this filing does not qualify 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: ELIZABETH C. YOUNG

S

01/25/2008

Electronic Signature of Signing Officer or Director

Date