

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000094904

FILED
Apr 22, 2008
Secretary of State

Entity Name: BLUE RIDGE PHYSICIANS GROUP, INC.

Current Principal Place of Business:

1211 WEST FLETCHER AVENUE
TAMPA, FL 33612

New Principal Place of Business:

1048 HAGEN DR
TRINITY, FL 34655

Current Mailing Address:

1211 WEST FLETCHER AVENUE
TAMPA, FL 33612

New Mailing Address:

P.O. BOX 1644
PALM HARBOR, FL 34682

FEI Number: 26-0775266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSIAL, A. J JR.
1211 WEST FLETCHER AVENUE
TAMPA, FL 33612 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: P () Delete
Name: SCHLAU, ARON
Address: 3820 TAMPA ROAD
City-St-Zip: PALM HARBOR, FL 34684

Title: S () Delete
Name: SCHLAU, ARON
Address: 3820 TAMPA ROAD
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHLAU, ARON
Address: PO BOX 1644
City-St-Zip: PALM HARBOR, FL 34682

Title: S (X) Change () Addition
Name: SCHLAU, ARON
Address: PO BOX 1644
City-St-Zip: PALM HARBOR, FL 34682

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: ARON SCHLAU

MGR

04/22/2008

Electronic Signature of Signing Officer or Director

Date