

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000005679

FILED
Jan 21, 2008
Secretary of State

Entity Name: COLLINS & HART, M.D., F.A.C.S., P.A.

Current Principal Place of Business:

960 7TH AVENUE NORTH
ST. PETERSBURG, FL 33705 US

New Principal Place of Business:

Current Mailing Address:

960 7TH AVENUE NORTH
ST. PETERSBURG, FL 33705 US

New Mailing Address:

FEI Number: 59-3159954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, PAUL STEVEN
960 7TH AVENUE NORTH
SAINT PETERSBURG, FL 33705 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: COLLIN, PAUL STEVEN
Address: 960 7TH AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33705 US

Title: S () Delete
Name: HART, VANESSA
Address: 960 7TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: COLLINS, PAUL STEVEN
Address: 960 7TH AVENUE NORTH
City-St-Zip: ST PETERSBURG, FL 33705 US

Title: DR. (X) Change () Addition
Name: HART, VANESSA
Address: 960 7TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33705

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: PAUL S. COLLINS

M.D.

01/21/2008

Electronic Signature of Signing Officer or Director

Date