

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000017400

FILED
Jan 18, 2005
Secretary of State

Entity Name: MANGIPUDY B. RAO, M.D., P.A.

Current Principal Place of Business:

5355 S SPRINGHILL DRIVE
SPRING HILL, FL 34606

New Principal Place of Business:

2428 N. ESSEX AVENUE
HERNANDO, FL 34442 US

Current Mailing Address:

5355 S SPRINGHILL DRIVE
SPRING HILL, FL 34606

New Mailing Address:

2428 N. ESSEX AVENUE
HERNANDO, FL 34442 US

FEI Number: 65-0488921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANSIPUDY, RAO MD
5355 SPRINGHILL DR
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

MANGIPUDY, RAO B.M.D.,PA
2428 N ESSEX AVENUE
HERNANDO, FL 34442 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: MANGIPUDY B. RAO

01/18/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: RAO, MANGIPUDY B
Address: 5355 SPRINGHILL DR
City-St-Zip: SPRING HILL, FL 34606

Title: VP () Delete
Name: MANJULA, M
Address: 5355 SPRING HILL DR
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: RAO, MANGIPUDY B
Address: 2428 N ESSEX AVENUE
City-St-Zip: HERNANDO, FL 34442

Title: VP (X) Change () Addition
Name: MANJULA, MANGIPUDY
Address: 2428 N ESSEX AVENUE
City-St-Zip: HERNANDO, FL 34442

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MANGIPUDY B. RAO,

DPST

01/18/2005

Electronic Signature of Signing Officer or Director

Date