2005 FOR PROFIT CORPORATION

FILED Feb 07, 2005 08:00 AM Secretary of State

CR2E034 (10/03)

Applied For Not Applicable

DOCUMENT # P9400060631 1. Entity Name CLASSICAL MEDICINE OF ST. PETERSBURG, INC.	
CLASSICAL MEDICINE OF ST. PETERSBURG, INC.	
	t t

Principal Place of Business

Mailing Address

1432 DR MLKING ST, N ST PETERSBURG, FL 33704 US

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02022005

DO NOT WRITE IN THIS SPACE	4. FEI Number 59-3263789	Applied F	
	5. Certificate of Status Desired		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KEANE, LAURA 1140 LOCUST ST. NE ST. PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE

No Chg-P

	hamed entity submits this statement for the pillons of registered agent.	urpose of chang -	jing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar	with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and file if	applicable	(NOTE Registered A	gent signature	required when reinstating)	ACCEPTANTE .	
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00		Campaign Finance d Contribution.	ng 🖂	\$5.00 May Be Added to Fees		
10,	OFFICERS AND DIREC	TORS		- '			
TITLE NAME STREET ADDRESS CITY ST ZIP	DP KEANE, LAURA 1140 LOCUST ST. NE ST. PETERSBURG, FL					U00000217132 02/07/05-80015-00	3 150.00
NAME STREET ADDRESS CITY-ST-ZIP			·				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					DO	NOT WRITE	• • •
NAME SIREET ADDRESS CITY ST ZIP			-		IN .	THIS SPACE	
HILLE NAME STREET ADDRESS CITY-ST ZIP		-					
TITLE NAME SIREET ADDRESS CITY ST ZIP	·						
12. I hereby of indicated of the corrections of the	certify that the information supplied with this fill on this report or supplemental report is true at portation or the receiver or trustee empowered or on an attachment yith an address, with all	ng does not quand accurate and to execute this other like empore	alify for the exemp that my signature report as required wered.	tion stated shall have by Chap	d in Section 119 07(3); te the same legal effecter 607, Florida Statute	(i), Florida Statutes. I further certify that of as if made under oath; that I am an o as; and that my name appears in Block	the information fficer or director 10 or Block 11 if

Laura Keane