ANNUAL REPORT

DOCUMENT # P95000000143

1. Entity Name KATHERINE R. LAURENZANO, M.D., P.A.



FILED Feb 21, 2007 08:00 AM Secretary of State

Principal Place of Business

4410 B NEWBERRY RD GAINESVILLE, FL 32607

Mailing Address

4410 B NEWBERRY RD GAINESVILLE, FL 32607



DO NOT WRITE IN THIS SPACE

01122007 No Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent

LAURENZANO, KATHERINE R 4410 B NEWBERRY RD GAINESVILLE, FL 32607

DO NOT WRITE IN THIS SPACE

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8. The above the obligat	named entity submits this statement for the pations of registered agent.	urpose of changing its regis	tered office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and ac	cept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Regis	itered Agent signature	required when reinstating)	DATE	-
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. Added to Fees		\$5.00 May Be Added to Fees	U00000642897 03/01/07-80061-023 150.00	
10.	OFFICERS AND DIRECTORS				<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST LAURENZANO, KATHERINE R 4410 B NEWBERRY RD GAINESVILLE, FL 32607					
TITLE NAME STREET ADDRESS CITY-SI-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · ·			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 provides empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Katherine & Laureneauc

1/16/07

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