2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101141

Entity Name: WALT KARNISKI, M.D., P.A.

FILED Jan 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

FLORIDA CHILDREN'S CENTER 12606 HENDERSON ROAD TAMPA, FL 33625 US

Current Mailing Address: New Mailing Address:

4331 CARROLLWOOD VILLAGE DRIVE 4331 CARROLLWOOD VILLAGE DRIVE

TAMPA, FL 33624 TAMPA, FL 33618

FEI Number: 59-3415178 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KARNISKI, WALT MD
4331 CARROLLWOOD VILLAGE DRIVE
TAMPA, FL 33624 US

KARNISKI, WALT MD
4331 CARROLLWOOD VILLAGE DRIVE
TAMPA, FL 33618 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: WALT KARNISKI 01/19/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: KARNISKI, WALT MD Name: KARNISKI, WALT MD

Address: 4331 CARROLLWOOD VILLAGE DRIVE Address: 4331 CARROLLWOOD VILLAGE DRIVE

City-St-Zip: TAMPA, FL 33624 City-St-Zip: TAMPA, FL 33618

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: WALT KARNISKI D 01/19/2004