

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000101716

Entity Name: BAY HEART GROUP, P.A.

FILED
Apr 19, 2005
Secretary of State

Current Principal Place of Business:

2814 W VIRGINIA AVENUE
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

2814 W VIRGINIA AVENUE
TAMPA, FL 33607 US

New Mailing Address:

FEI Number: 59-3416226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD., 10TH FLOOR
TAMPA, FL 336075736 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: GLOVER, MATTHEW
Address: 4209 W CULBREATH AVE
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: IRWIN, JAMES M
Address: 16054 PENWOOD DR
City-St-Zip: TAMPA, FL 33647

Title: T () Delete
Name: PRIDA, XAVIER E
Address: 2626 S DUNDEE BLVD
City-St-Zip: TAMPA, FL 33629

Title: V () Delete
Name: TOOLE, JOHN C
Address: 4415 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: S () Delete
Name: GOLDMAN, ANTHONY P
Address: 3304 WESTMORELAND DR
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MATTHEW U. GLOVER, MD

P

04/19/2005

Electronic Signature of Signing Officer or Director

Date