

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000024400

Entity Name: MACIEJ TUMIEL, M.D., P.A.

FILED
Mar 30, 2005
Secretary of State

Current Principal Place of Business:

2101 NORTHSIDE DR
SUITE 603
PANAMA CITY, FL 32405 US

New Principal Place of Business:

Current Mailing Address:

2102 NORTHSIDE DR.
SUITE 603
PANAMA CITY, FL 32405 US

New Mailing Address:

2101 NORTHSIDE DR.
SUITE 603
PANAMA CITY, FL 32405 US

FEI Number: 59-3449017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANEY, ROGER L III
1378 N RAILROAD AVE
CHIPLEY, FL 32428 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: OD () Delete
Name: TUMIEL, MACIEJ
Address: 2101 NORTHSIDE DR #603
City-St-Zip: PANAMA CITY, FL 32405

Title: OD () Delete
Name: TUMIEL, DEBBIE
Address: 2101 NORTHSIDE DR #603
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MACIEJ TUMIEL

OD

03/30/2005

Electronic Signature of Signing Officer or Director

Date