2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000063894

Entity Name: PETER R. ALDANA, M.D., P.A.

FILED Apr 06, 2008 Secretary of State

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

1801 S. 23RD STREET SUITE 7 FORT PIERCE, FL 34950

Current Mailing Address: New Mailing Address:

1801 S. 23RD STREET SUITE 7 FORT PIERCE, FL 34950

FEI Number: 65-0771143 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:

ALDANA, PETER R MD 1801 S 23RD 23RD , STE7 FT PIERCE, FL 34950 US ALDANA, PETER R MD 1801 S. 23RD ST. SUITE 7 FT PIERCE, FL 34950 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: 04/06/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DR. (X) Change () Addition

 Name:
 ALDANA, PETER R MD
 Name:
 ALDANA, PETER R MD

 Address:
 1801 S. 23RD ST, STE 7
 Address:
 1801 S. 23RD ST, STE 7

 City-St-Zip:
 FORT PIERCE, FL 34950
 City-St-Zip:
 FORT PIERCE, FL 34950

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: PETER ALDANA DR. 04/06/2008