2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000098290

Entity Name: PINNACLE MEDICAL GROUP, P.A.

FILED Nov 15, 2007 Secretary of State

Littly Nam	IE. FINNACEL	. MEDICAL GROOF, F.A.				
Current Pri	incipal Place o	of Business:	New Princ	New Principal Place of Business:		
4110 MANATEE AVENUE BRADENTON, FL 34205				315 75TH STREET WEST BRADENTON, FL 34209		
Current Mailing Address:			New Mailii	New Mailing Address:		
	TEE AVENUE DN, FL 34209					
FEI Number: (65-0801453	FEI Number Applied For ()	FEI Number Not Appli	cable () Certific	ate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
	T W DN, FL 34205	US	ooso of changing it	s registered office or	registered agent or both	
in the State		ıbmits this statement for the purp	Jose of changing it	s registered office of	registered agent, or both,	
SIGNATUR		Signature of Registered Agent				
				S/CHANGES TO OF	FICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TD () E BOYER, KEVIN L 4110 MANATEE A BRADENTON, FL	AVENUE	Title: Name: Address: City-St-Zip:	VD (X) Change BOYER, KEVIN L M.D. 7005 CORTEZ ROAD W BRADENTON, FL 34210		
Title: Name: Address: City-St-Zip:	VD () [ALEXANDER, JA 2010 59TH ST W BRADENTON, FL	#5500	Title: Name: Address: City-St-Zip:	TD (X) Change CRAGER, KENNETH 315 75TH STREET WES BRADENTON, FL 34209	iT	
Title: Name: Address: City-St-Zip:	SD ()[PELHAM, STEPH 3909 EAST BAY HOLMES BEACH	DRIVE #100	Title: Name: Address: City-St-Zip:	VD (X) Change CLULOW, SCOTT 7005 CORTEZ ROAD W BRADENTON, FL 34210	EST	
Title: Name: Address: City-St-Zip:	PD () [KALLINS, MARC 4110 MANATEE A BRADENTON, FL	4VE	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	VD () Change RODRIGUEZ, CARLOS 315 75TH STREET WES BRADENTON, FL 34209	Τ	

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: J. MERIC CFO 11/15/2007