2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000047037

Address:

City-St-Zip:

1810 SE PORT ST LUCIE BLVD

PORT SAINT LUCIE, FL 34952

Entity Name: LARRY QUIRIT, M.D., P.A.

FILED Jan 20, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	PORT ST. LU LUCIE, FL 3	CIE BOULEVARD 4952 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	RACQUET C Y, FL 349902				
FEI Number:	: 65-0842671	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
	ARRY RACQUET C Y, FL 349902				
	named entity e of Florida.	submits this statement for the	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	QUIRIT, LARR 1810 S.E. PO) Delete YY RT ST. LUCIE BOULEVARD CIE, FL 34952	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	V (QUIRIT, MARL) Delete ENE	Title: (Name:) Change () Addition	

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LARRY QUIRIT P 01/20/2007