2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2005
Secretary of State

DOCUMENT# P98000086472

Entity Name: HAWTHORNE MEDICAL CENTER, P.A.

Current Principal Place of Business:

21815 SOUTHEAST 71ST AVENUE
HAWTHORNE, FL 32640 US

New Principal Place of Business:

Current Mailing Address:

21815 SOUTHEAST 71ST AVENUE
HAWTHORNE, FL 32640 US

New Mailing Address:

FEI Number: 59-3537283 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COLASANTE, ONA M.D.
21115 S.E. 179TH PLACE
LOCHLOOSA, FL 32662 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: D ( ) Delete
Name: COLASANTE, ONA M.D.
Address: 21115 S.E. 179TH PLACE
City-St-Zip: LOCHLOOSA, FL 32662

Title: T ( ) Delete
Name: POWELL, DONALD G
Address: 1863 STATE ROAD 20
City-St-Zip: HAWTHORNE, FL 32640

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change ( ) Addition
Name: METZLER, MICHAEL CPA
Address: 2630 NW 41ST ST BLDG. A
City-St-Zip: GAINESVILLE, FL 32635

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: ONA M COLASANTE MD D 01/17/2005

Electronic Signature of Signing Officer or Director Date