

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000004921

Entity Name: FIRST FLORIDA MEDICAL, INC.

FILED
Apr 26, 2005
Secretary of State

Current Principal Place of Business:

7910 N. TAMIAMI TR.
101
SARASOTA, FL 34243

Current Mailing Address:

P O BOX 15642
SARASOTA, FL 34271

New Principal Place of Business:

373 BRADEN AVE
101
SARASOTA, FL 34243

New Mailing Address:

FEI Number: 65-0887699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GELETKA, SHERYL L
7910 N. TAMIAMI TR.
SUITE 101
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

GELETKA, SHERYL L
373 BRADEN AVE.
SUITE 101
SARASOTA, FL 34243 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:

04/26/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MITCHELL, ROBERT
Address: PO BOX 15642
City-St-Zip: SARASOTA, FL 34277

Title: V () Delete
Name: GELETKA, SHERYL
Address: 7910 N. TAMIAMI TR. STE 101
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MITCHELL, ROBERT
Address: 373 BRADEN AVE. 101
City-St-Zip: SARASOTA, FL 34243

Title: V (X) Change () Addition
Name: GELETKA, SHERYL
Address: 373 BRADEN AVE. 101
City-St-Zip: SARASOTA, FL 34243

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: SHERYL L. GELETKA

VP

04/26/2005

Electronic Signature of Signing Officer or Director

Date