

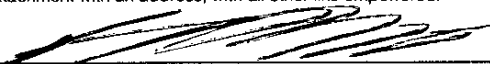


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005 8:00 am
Secretary of State

01-20-2005 90040 011 ***150.00

DOCUMENT # P99000066096 1. Entity Name ASSOCIATES IN PRACTICE MANAGEMENT, INC.					
Principal Place of Business 100 W KENNEDY BLVD SUITE 650 TAMPA, FL 33602			Mailing Address 2907 W BAY TO BAY BLVD STE 101 TAMPA, FL 33629		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 100 w. Kennedy Blvd Suite, Apt. #, etc. Suite 650 City & State Tampa FL Zip Country FL 33602			
4. FEI Number 59-3589533				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BOMAR, CARSON B JR. 307 S BLVD STE A TAMPA, FL 33606			7. Name and Address of New Registered Agent Name Thomas K. Willett Street Address (P.O. Box Number is Not Acceptable) 100 W. Kennedy Blvd Suite 650 City Tampa FL Zip Code 33602		
8. 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. I am familiar with, and accept the obligations of registered agents. SIGNATURE  DATE 1-17-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BOMAR, CARSON B JR. 2907 W BAY TO BAY BLVD STE 101 TAMPA, FL 33629	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST REED, FREDERICK R JR 307 S BLVD STE A TAMPA, FL 33606	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WILLETT, THOMAS K 2907 W BAY TO BAY BLVD #101 TAMPA, FL 33629	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP WILLETT, KEITH 2907 W BAY TO BAY BLVD #101 TAMPA, FL 33629	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	(Empty)	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Keith Willett Date 1-17-05 Daytime Phone # 813-229-0600 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

50004230



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