## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000108672

FILED Feb 16, 2004 Secretary of State

Entity Name: BARIATRIC TREATMENT CENTERS OF FLORIDA, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
35 S. PRO PSILANT	OSPECT I, MI 48198				
Current Mailing Address:			New Maili	New Mailing Address:	
35 S. PRO PSILANT	OSPECT I, MI 48198				
El Number:	: 58-2543833	FEI Number Applied For()	FEI Number Not Appl	icable ( ) Certificate of Status Desired ( )	
ame and	Address of (	Current Registered Agent:	Name and	Address of New Registered Agent:	
200 S. PI LANTATI	ORATION SYS NE ISLAND R ION, FL 33324	D. 4 US			
	named entity e of Florida.	submits this statement for the pu	rpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR					
	Electro	nic Signature of Registered Agen	it	Date	
ection Car	mpaign Financin	g Trust Fund Contribution ( ).			
FFICER	S AND DIREC	TORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTOR	
tle: ame: ldress: ty-St-Zip:	D ( PITTMAN, RAN 135 S. PROSP YPSILANTI, MI	PECT	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition PITTMAN, RANDALL L 135 S. PROSPECT YPSILANTI, MI 38198 US	
tle: ame:	LENZ, LAUREN	) Delete NCE H JR	Title: Name:	D (X) Change ( ) Addition LENZ, LAURENCE H JR	
	135 S. PROSP YPSILANTI, MI		Address: City-St-Zip:	135 S. PROSPECT YPSILANTI, MI 48198 US	
ity-St-Zip: tle: ame: ddress:	YPSILANTI, MI			135 S. PROSPECT	
ddress: tty-St-Zip:  ttle: ame: ddress: tty-St-Zip:  ttle: ame: ddress: tty-St-Zip:	YPSILANTI, MI	48198	City-St-Zip: Title: Name: Address:	135 S. PROSPECT YPSILANTI, MI 48198 US  D ( ) Change (X) Addition BROWN, ROBERT A 135 S. PROSPECT	
ty-St-Zip: tle: ame: ddress: ty-St-Zip: tle: ame: ddress:	YPSILANTI, MI (	48198 ) Delete	City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	135 S. PROSPECT YPSILANTI, MI 48198 US  D ( ) Change (X) Addition BROWN, ROBERT A 135 S. PROSPECT YPSILANTI, MI 48198 US  O ( ) Change (X) Addition PITTMAN, RANDALL L 135 S. PROSPECT	

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: LAURENCE H. LENZ, JR. D 02/16/2004

ROBERT O. HOPKINS 135 S. PROSPECT YPSILANTI, MI 48198

JANET MASTERS 135 S. PROSPECT YPSILANTI, MI 48198

LAURENCE H. LENZ, JR. 135 S. PROSPECT YPSILANTI, MI 48198