

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000108814

FILED  
Apr 26, 2004  
Secretary of State

Entity Name: CHRISTINE A. KLEPP, M.D., P.A.

## Current Principal Place of Business:

2182 BLUE SPRINGS ROAD  
WEST PALM BEACH, FL 33411

## New Principal Place of Business:

## Current Mailing Address:

2182 BLUE SPRINGS ROAD  
WEST PALM BEACH, FL 33411

## New Mailing Address:

FEI Number: 65-0967688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPRINKLE, PHILIP M II, ESQ  
PHILLIPS POINT, EAST TOWER  
777 SOUTH FLAGLER DRIVE SUITE 900  
WEST PALM BEACH, FL 33401 US

## Name and Address of New Registered Agent:

LARCOMBE, VALERIE ESQ  
PHILLIPS POINT, EAST TOWER  
777 SOUTH FLAGLER DRIVE SUITE 900  
WEST PALM BEACH, FL 33401 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: VALERIE LARCOMBE

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: KLEPP, CHRISTINE A MD  
Address: 2182 BLUE SPRINGS ROAD  
City-St-Zip: WEST PALM BEACH, FL 33411

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CHRISTINE A. KLEPP, MD

D

04/26/2004

Electronic Signature of Signing Officer or Director

Date