

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S07532

FILED  
Jan 07, 2005  
Secretary of State

Entity Name: AMBULATORY ANKLE & FOOT CENTER OF FLORIDA, INC.

## Current Principal Place of Business:

1509 S ORANGE AVE  
ORLANDO, FL 32806

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 536951  
ORLANDO, FL 328536951

## New Mailing Address:

P.O. BOX 140331  
ORLANDO, FL 328140331

FEI Number: 59-3035816

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RENTON, GREGORY J  
714 EAST COLONIAL DRIVE  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

RENTON, GREGORY J  
3670 MAGUIRE BOULEVARD  
SUITE 220  
ORLANDO, FL 32803 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:

01/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MAGUIRE, RAYMER III  
Address: 1010 EXECUTIVE CENTER DR, STE 121  
City-St-Zip: ORLANDO, FL 32803

Title: VP ( ) Delete  
Name: MOATS, DAVID B  
Address: 714 E. COLONIAL DR  
City-St-Zip: ORLANDO, FL 32803

Title: VP ( ) Delete  
Name: MAGUIRE, CRAIG C  
Address: 714 E. COLONIAL DR  
City-St-Zip: ORLANDO, FL 32803

Title: ST ( ) Delete  
Name: RENTON, GREGORY J  
Address: 714 EAST COLONIAL DRIVE  
City-St-Zip: ORLANDO, FL 32803

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: MOATS, DAVID B  
Address: 3670 MAGUIRE BOULEVARD, SUITE 220  
City-St-Zip: ORLANDO, FL 32803

Title: VP (X) Change ( ) Addition  
Name: MAGUIRE, CRAIG C  
Address: 3670 MAGUIRE BOULEVARD, SUITE 220  
City-St-Zip: ORLANDO, FL 32803

Title: ST (X) Change ( ) Addition  
Name: RENTON, GREGORY J  
Address: 3670 MAGUIRE BOULEVARD, SUITE 220  
City-St-Zip: ORLANDO, FL 32803

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: GREGORY J. RENTON

ST

01/07/2005

Electronic Signature of Signing Officer or Director

Date