2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 05, 2005 8:00 am Secretary of State 05-05-2005 90085 038 ***150.00

4/27/05

415-776-2514

Daytime Phone #

MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1. Entity Nam	VIENT # 520931 GRIDLEY, JR. M.D., P.A.	<u> </u>				05-05-2005	90083 036	3130	<i>3.</i> 00
Sultio, ApJ. #, etc. Sultio, ApJ. #, etc. Sultio, ApJ. #, etc. O402005 Chg.P CR2E034 (10/03)	689 9TH STR	EET N	689 9TH STREET N							
City & State Country Zip Country Zip Country Zip Country Zip Country S. Certificate of Status Desired S. Name and Address of Current Registered Agent T. Name and Address of New Registered Agent Sireed Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code Sireed Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent. SIGNATURE Sireed Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent. SIGNATURE Signature Agent special remaining FILE NOW/III FEE IS \$150.00 STATE MONEY FILE NOW/III FEE IS \$150.00 STATE ADDRESS OTH STATE Descent Title MAKE SIREET ADDRESS OTH STATE OTH STATE TITLE MAKE SIREET ADDRESS OTH STATE Descent Title MAKE SIREET ADDRESS OTH STATE OTH STATE Descent Title STATE ADDRESS OTH STATE TITLE MAKE SIREET ADDRESS OTH STATE OTH STATE TITLE MAKE SIREET ADDRESS OTH STATE SIRET ADDRESS OTH STATE SIRET ADDRESS OTH STATE OTH STATE TITLE MAKE SIRET ADDRESS OTH STATE STATE ADDRESS OTH STATE STATE ADDRESS OTH STATE TITLE	2. Principal P	ace of Business	3. Mailing Address							
Signature Sign	Suite, Apt.	#, etc.	Suite, Apt. #, etc.			04202005	Chg-P	CR2E034	1 (10/03)	
Country Zip Country 5. Certificate of Status Desired Status Desired Sequence Sea Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent 8. Name Series Address (P.O. Box Number is Not Acceptable) City FL Zip Code	City & State)	City & State						 	•
Sirear Address of Current Registered Agent 1. Name and Address of New Registered Agent 1. Name and Address	Zip	Country	Zip Country		5 Certificate of Status Desired S8.75 Additional					
SIGNATURE Street Address (P.O. Box Number is Not Acceptable)		6. Name and Address of Current Registered Agent		1						
Sirest Address (P.O. Box Number is Not Acceptable) City					Name					-
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and active obligations of registered agent. SIGNATURE Spreadure, hyped or cereted agent agent and the 4 acciderable. (MOTE Registered Agent separative required when rendating) DATE	689 9TH STREET N				Street Address (P.O. Box Number is Not Acceptable)					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and act the obligations of registered agent. SIGNATURE Speaker, hybrid or private have at legaciate agent and the ill applicable. (NOTE Registered Agent Signature required when remeasure) DATE	NAFEES, I	L 34102			0:				1 = 0.4	
SIGNATURE Spears, typed or certed name of regented agent and title if accidence in the properties of the properties o				1	City			FL	Zip Code	3
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STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not quality 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 direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; that I am an officer or direction of the same legal effect as if made under oath; the same legal effect as if made under	NAME STREET ADDRESS CITY-ST-ZIP			NAME STREE CITY	T ADDRESS ST-ZIP					Addition