2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005
Secretary of State

DOCUMENT# 691565

Entity Name: A. S. WEEKLEY JR., M.D., P.A.

Current Principal Place of Business:

6914 EAST FOWLER AVENUE
SUITE J
TAMPA, FL 336171705 US

New Principal Place of Business:

Current Mailing Address:

6914 EAST FOWLER AVENUE
SUITE J
TAMPA, FL 336171705 US

New Mailing Address:

FEI Number: 59-2107495 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEEKLEY, A S JR
6914 EAST FOWLER AVENUE
SUITE J
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

WEEKLEY, A S JR
6914 EAST FOWLER AVENUE
SUITE J
TAMPA, FL 336171705 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: 02/16/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: WEEKLEY, A S JR
Address: 6914 EAST FOWLER AVENUE, SUITE J
City-St-Zip: TAMPA, FL 33617

Title: T ( ) Delete
Name: WEEKLEY, A S JR
Address: 6914 EAST FOWLER AVENUE, SUITE J
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition
Name: WEEKLEY, A S JR
Address: 6914 EAST FOWLER AVENUE, SUITE J
City-St-Zip: TAMPA, FL 336171705 US

Title: T (X) Change ( ) Addition
Name: WEEKLEY, A S JR
Address: 6914 EAST FOWLER AVENUE, SUITE J
City-St-Zip: TAMPA, FL 336171705 US

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: A S WEEKLEY, JR DPS 02/16/2005
Electronic Signature of Signing Officer or Director — Date