

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000079599

**FILED**  
**Nov 08, 2006**  
**Secretary of State**

**Entity Name:** OCEAN MEDICAL EXECUTIVE SEARCH, INC.

**Current Principal Place of Business:**

9471 BAYMEADOWS ROAD  
SUITE 305  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

9140 GOLFSIDE DRIVE  
SUITE 5N  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

9471 BAYMEADOWS ROAD  
SUITE 305  
JACKSONVILLE, FL 32256

**New Mailing Address:**

9140 GOLFSIDE DRIVE  
SUITE 5N  
JACKSONVILLE, FL 32256

**FEI Number:** 20-0097698

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MYRA LOUGHRAN, P.A.  
333 FIRST ST. NORTH, STE. 305  
JACKSONVILLE BEACH, FL 32250 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: STEELE, CATHERINE M  
Address: 816 NORTH O STREET, #78  
City-St-Zip: LOMPOC, CA 93436

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D ( ) Change (X) Addition  
Name: BAILEY, ROBERT S  
Address: 9140 GOLFSIDE DRIVE, SUITE 5N  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBERT SCOTT BAILEY

D

11/08/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date