

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156071

FILED
May 01, 2006
Secretary of State

Entity Name: BERND RAPHAEL, M.D., P.A.

Current Principal Place of Business:

1530 LEE BLVD STE 1100
LEHIGH ACRES, FL 33936

New Principal Place of Business:

470 LEE BLVD
LEHIGH ACRES, FL 33936

Current Mailing Address:

1530 LEE BLVD STE 1100
LEHIGH ACRES, FL 33936

New Mailing Address:

470 LEE BLVD
LEHIGH ACRES, FL 33936

FEI Number: 20-0632493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERND, RAPHAEL
1530 LEE BLVD STE 1100
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

BERND, RAPHAEL
470 LEE BLVD
LEHIGH ACRES, FL 33936 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: _____

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: RAPHAEL, BERND
Address: 1530 LEE BLVD., SUITE 1100
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D () Delete
Name: RAPHAEL, BERND
Address: 1530 LEE BLVD., SUITE 1100
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: RAPHAEL, BERND
Address: 470 LEE BLVD.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D (X) Change () Addition
Name: RAPHAEL, BERND
Address: 470 LEE BLVD.
City-St-Zip: LEHIGH ACRES, FL 33936

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: BERND RAPHAEL

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date