## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000033832

Entity Name: ROBIN BEST, M.A., C.C.C., P.A.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

3111 UNIVERSITY DR 5491 UNIVERSITY DRIVE

STE 725 STE 101

CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33067 US

Current Mailing Address: New Mailing Address:

3111 UNIVERSITY DR 5491UNIVERSITY DR

STE 725 STE 101

CORAL SPRINGS, FL 33065 US CORAL SPRINGS, FL 33067 US

FEI Number: 65-0487355 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MURAD, RICHARD P 5160 NW 100 AVE

CORAL SPRINGS, FL 33076 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

Name: BEST, ROBIN MA Name: BEST, ROBIN MA

Address: 3111 UNIVERSITY DR, STE 725 Address: 5491 UNIVERSITY DR, STE 101 City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33067

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: ROBIN BEST P 01/04/2005