2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2006
Secretary of State

DOCUMENT# P03000004308

Entity Name: DEANNE TORTORICI, P.A.

Current Principal Place of Business:

1729 LOCHAMY LN
JACKSONVILLE, FL 32259

New Principal Place of Business:

332 N LOMBARDY LOOP
JACKSONVILLE, FL 32259

Current Mailing Address:

1729 LOCHAMY LN
JACKSONVILLE, FL 32259

New Mailing Address:

332 N LOMBARDY LOOP
JACKSONVILLE, FL 32259

FEI Number: 74-3075339 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TORTORICI, DEANNE
1729 LOCHAMY LN
JACKSONVILLE, FL 322259 US

Name and Address of New Registered Agent:

TORTORICI, DEANNE
332 N LOMBARDY LOOP
JACKSONVILLE, FL 322259 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: 01/24/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: TORTORICI, DEANNE
Address: 1729 LOCHAMY LN
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP ( ) Delete
Name: TORTORICI, DEANNE
Address: 1729 LOCHAMY LN
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: TORTORICI, DEANNE
Address: 332 N LOMBARDY LOOP
City-St-Zip: JACKSONVILLE, FL 32259

Title: VP (X) Change ( ) Addition
Name: TORTORICI, DEANNE
Address: 332 N LOMBARDY LOOP
City-St-Zip: JACKSONVILLE, FL 32259

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: DEANNE TORTORICI P 01/24/2006
Electronic Signature of Signing Officer or Director — Date