2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# 269776

Entity Name: PAXON PROFESSIONAL CENTER INC

Current Principal Place of Business:

759 N EDGEWOOD AVE
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

759 N EDGEWOOD AVE
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 59-1088427 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'STEEN, HAROLD S.
759 N. EDGEWOOD AVENUE
JACKSONVILLE, FL 32205 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PS ( ) Delete
Name: O'STEEN, HOWARD K.,
Address: 759 N EDGEWOOD AV
City-St-Zip: JACKSONVILLE, FL 32254

Title: VP ( ) Delete
Name: TOOLE, GREGORY
Address: 757 N EDGEWOOD AV
City-St-Zip: JACKSONVILLE, FL 32254

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GREGORY S. TOOLE VP 04/26/2006

Electronic Signature of Signing Officer or Director Date