

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 517299

FILED
Mar 19, 2006
Secretary of State

Entity Name: YANK D. COBLE, JR., M.D., P.A.

Current Principal Place of Business:

1000 RIVERSIDE AVE
STE 250
JACKSONVILLE, FL 32204

Current Mailing Address:

555 BISHOPGATE LN
JACKSONVILLE, FL 32204

New Principal Place of Business:

1000 RIVERSIDE AVE
STE 205
JACKSONVILLE, FL 32204

New Mailing Address:

1000 RIVERSIDE AVENUE
STE 205
JACKSONVILLE, FL 32204

FEI Number: 59-1696936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBLE, YANK D. JR.
555 BISHOPGATE LN
JACKSONVILLE, FL 32204 US

Name and Address of New Registered Agent:

COBLE, YANK D. JR.
1000 RIVERSIDE AVENUE
STE 205
JACKSONVILLE, FL 32204 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:

03/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COBLE, YANK D JR
Address: 1000 RIVERSIDE AVE STE 250
City-St-Zip: JACKSONVILLE, FL 32204

Title: D () Delete
Name: COBLE, SHERETH L
Address: 1000 RIVERSIDE AVE STE 250
City-St-Zip: JACKSONVILLE, FL 32204

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: COBLE, YANK D JR
Address: 1000 RIVERSIDE AVE STE 205
City-St-Zip: JACKSONVILLE, FL 32204

Title: D (X) Change () Addition
Name: COBLE, SHERETH L
Address: 1000 RIVERSIDE AVE STE 205
City-St-Zip: JACKSONVILLE, FL 32204

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: YANK D COBLE, JR.

PRES

03/19/2006

Electronic Signature of Signing Officer or Director

Date