## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

OCUMENT # 549830

Entity Name
ADOLFO N. MILLAN, M.D., P.A.



FILED May 27, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

5601 CORPORATE WAY #301 WEST PALM BEACH, FL 33407

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04152008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-1783894

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MILLAN, ADOLFO 5601 CORPORATE WAY #301 WEST PALM BEACH, FL 33407

SIGNATURE

DO NOT WRITE IN THIS SPACE

8.	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.	I am familiar with, and accept
	the obligations of registered agent.	

FU E NOW!!! FEE 10 4450.00

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. PD TITLE MILLAN, ADOLFO N., M.D. NAME 5601 CORPORATE WAY #301 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33407 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

000000952101 06/04/08-80065-014 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like-empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-08

(511) 478.7423

Daytime Phone #