

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 17, 2006 08:00 AM
Secretary of State**

DOCUMENT # 594950

1. Entity Name

C. VAN DEN HEUVEL, M.D., P.A.



Principal Place of Business

**2848 S SEACREST BLVD
BOYNTON BEACH, FL 33435 US**

Mailing Address

**2848 S SEACREST BLVD
BOYNTON BEACH, FL 33435 US**



01102006

No Chg-P

CR2E034 (11/05)

4. FEI Number

59-1870406

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**VAN DEN HEUVEL, C
2848 S SEACREST BLVD
BOYNTON BEACH, FL 33435**

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
VAN DEN HEUVEL, C. (VST)
2848 S SEACREST BLVD
BOYNTON BCH, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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000000347891
01/19/06-80058-003 150.00

**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:

C. Van Den Heuvel, M.D.