

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 603792

FILED
Jan 11, 2005
Secretary of State

Entity Name: JACK T. WEAVER, D.P.M., D.O., M.D., P.A.

Current Principal Place of Business:

3120 CORRINE DRIVE
ORLANDO, FL 32803

New Principal Place of Business:

400 W MORSE BLVD.
SUITE 101
WINTER PARK, FL 32789

Current Mailing Address:

3120 CORRINE DRIVE
ORLANDO, FL 32803

New Mailing Address:

400 W MORSE BLVD
SUITE 101
WINTER PARK, FL 32789

FEI Number: 59-1409563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, HOWARD D.
3120 CORRINE DR
ORLANDO, FL 32803 US

Name and Address of New Registered Agent:

WEAVER, HOWARD D
400 W MORSE BLVD
SUITE 101
WINTER PARK, FL 32789 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: HOWARD D WEAVER

01/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEAVER, HOWARD D
Address: 3120 CORRINE DRIVE
City-St-Zip: ORLANDO, FL

Title: ST () Delete
Name: WEAVER, MARY R,
Address: 3120 CORRINE DRIVE
City-St-Zip: ORLANDO, FL

Title: VPD () Delete
Name: WEAVER, JACK T
Address: 3120 CORRINE DRIVE
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WEAVER, HOWARD D
Address: 400 W MORSE BLVD STE 101
City-St-Zip: WINTER PARK, FL 32789

Title: ST (X) Change () Addition
Name: WEAVER, MARY R
Address: 400 W MORSE BLVD STE 101
City-St-Zip: WINTER PARK, FL 32789

Title: VPD (X) Change () Addition
Name: ALBERS, DEBRA S
Address: 400 W MORSE BLVD STE 101
City-St-Zip: WINTER PARK, FL 32789

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HOWARD D WEAVER

PD

01/11/2005

Electronic Signature of Signing Officer or Director

Date