2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL H	EPURT (AR)		Jan 25, 2006 08:00 AM
DOCU 1. Entity Nam	MENT # 604688			Secretary of State
PHILIP N	. GELFAND, M.D., P.A.			
Principal Plac	ce of Business	- Mailing Address		
PHILIP N. GELFAND, M.D. 1966 BRIDGEWATER DR. LAKE MARY FL 32746		PHILIP N. GELFAND, M 1966 BRIDGEWATER DI LAKE MARY FL 32746		
2. Principal Place of Business		3. Mailing Address		(seems mark 20 (if films mit films mart breit diet 2 (m. 2000) 200))) (188)
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CRZE034 (10/05)
City & State		City & State		4. FEI Number 59-1487459 Applied For Not Applied For
Zip	Country	Zip	Country	Certificate of Status Desired
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent
GELFAND, PHILIP N. (M.D.)			Name	
196	6 BRIDGEWATER DR. (E MARY FL 32746		Street Add	ress (P.O. Box Number is Not Acceptable)
			City	₽ ∎ Zip Code
8. The above	amed entity submits this statement for	or the number of channing its	. }_ `	FL Zip Code egistered agent, or both, in the State of Florida. I am familiar with, and accept
the obliga	tions of registered agent.	ar the purpose of critaliging no to	29/3/3/60 3/1/00 0/ /0	gistarda again, or boss, sir più biato di Fibrida. Tara iseniral triut, ara accep
SIGNATURE	Signature, typed or printed name of registered agen	and life if applicable (NOTE	Registered Agent signature	recruited when reinstalms) ORTE
After	FILE NOW!!) FEE IS \$150.00 May 1, 2006 Fee Will Be \$550.01 k Payable to Florida Department o		, , , , , , , , , , , , , , , , , , ,	Election Campaign Financing \$5.00 May 8s Trust Fund Contribution. Added to Fees
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	P CELEBRATE SUMMER	☐ Detete	TITLE	☐ Change ☐ Addited
NAME STREET ADDRESS CITY-SI-ZIP	GELFAND, PHILIP N 1966 BRIDGEWATER DR. LAKE MARY FL 32746		NAME STREET ADDRESS CITY-SI-ZIP	U00000401223 02/02/06-80036-005 150.00
TILE	S	☐ Dolete	TITLE	Change Addition
NAME STREET ADDRESS	GELFAND, FRANCINE	- 0.000	NAME STREET ADDRESS	E orange E provinci
City-ST-ZIP	LAKE MARY FL 32746		City-ST-Zip	
TITLE NAME	D DISTRIBUTE DE CONTRACTOR DE	☐ Delete	TITLE MAME	Change Additio
STREET ADDRESS CITY-ST-ZIP	GELFAND, PHILIP N 1966 BRIDGEWATER DR. LAKE MARY FL 32746	-	STREET ADDRESS CITY-ST-ZIP	
TITLE	LANCE WATER PERSON	☐ Defete	RULE	☐ Change ☐ Additio
NAME STREET ADDRESS			NAME CTREET ADDRESS	
CITY-ST-ZIP	{		STREET ADDRESS CITY-ST-ZIP	
MILE		☐ Delete	HATE	Change Additio
NAME STREET ADDRESS			NAME Street address	
CITY-ST-ZIP			CITY ST-ZIP	
TOTALE		☐ Celete	TITLE	☐ Change ☐ Additio
NAME STREET ADDRESS	}		NAME STREET ADDRESS	
CITY-SI-ZIP			CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

Philip N. Gelfand

FILED

407-804-0045