

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 647554

FILED
Apr 13, 2006
Secretary of State

Entity Name: DAVID J. SCHULAK, M.D., P.A.

Current Principal Place of Business:

3000 E. FLETCHER
STE 370
TAMPA, FL 33613 US

New Principal Place of Business:

13701 BRUCE B DOWNS BLVD
STE 115
TAMPA, FL 33613 US

Current Mailing Address:

3000 E. FLETCHER
STE 370
TAMPA, FL 33613 US

New Mailing Address:

13701 BRUCE B DOWNS BLVD
STE 115
TAMPA, FL 33613 US

FEI Number: 59-1953161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULAK, DAVID
3000 E FLETCHER
STE 370
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

SCHULAK, DAVID
13701 BRUCE B DOWNS BLVD
STE 115
TAMPA, FL 33613 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:

04/13/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHULAK, DAVID J,
Address: 3000 E FLETCHER STE 370
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHULAK, DAVID J,
Address: 13701 BRUCE B DOWNS BLVD #115
City-St-Zip: TAMPA, FL 33613

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: DAVID J SCHULAK

PD

04/13/2006

Electronic Signature of Signing Officer or Director

Date