

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 692425

FILED
Jan 14, 2006
Secretary of State

Entity Name: DOMINICK J. PASSALACQUA, M.D., P.A.

Current Principal Place of Business:

7812 W GOLF CLUB ST
CRYSTAL RIVER, FL 33429 US

New Principal Place of Business:

1491 N. WHISPERWOOD DR.
HERNANDO, FL 34442 US

Current Mailing Address:

7812 W GOLF CLUB ST
CRYSTAL RIVER, FL 34429 US

New Mailing Address:

1491 N. WHISPERWOOD DR.
HERNANDO, FL 34442 US

FEI Number: 59-2103454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASSALACQUA, DOMINICK J PRES.
7812 W. GOLF CLUB STREET
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

PASSALACQUA, DOMINICK J PRES.
1491 N. WHISPERWOOD DR.
HERNANDO, FL 34442 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: DOMINICK J. PASSALACQUA, M.D.

01/14/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PASSALACQUA, DOMINICK J PRES.
Address: 7812 W. GOLF CLUB STREET
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PASSALACQUA, DOMINICK J PRES.
Address: 1491 N. WHISPERWOOD DR.
City-St-Zip: HERNANDO, FL 34442

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: DOMINICK J. PASSALACQUA, M.D.

PD

01/14/2006

Electronic Signature of Signing Officer or Director

Date