

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F54622

FILED
Apr 23, 2005
Secretary of State

Entity Name: RICHARD W. LIEBERMAN, M.D., P.A.

Current Principal Place of Business:

4001 N OCEAN BV
806-B
BOCA RATON, FL 33431

Current Mailing Address:

4001 N OCEAN BV
806-B
BOCA RATON, FL 33431

New Principal Place of Business:

4001 N OCEAN BV
B-806
BOCA RATON, FL 33431

New Mailing Address:

4001 N OCEAN BV
B-806
BOCA RATON, FL 33431

FEI Number: 59-2144375

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBERMAN, RICHARD W.
4001 N OCEAN BV 806-B
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

LIEBERMAN, RICHARD W.
4001 N OCEAN BV
B-806
BOCA RATON, FL 33431 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:

04/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVD () Delete
Name: LIEBERMAN, RICHARD W.
Address: 4001 N OCEAN BV 806-B
City-St-Zip: BOCA RATON, FL 33431

Title: M () Delete
Name: LIEBERMAN, RICHARD W.
Address: 4001 N OCEAN BV 806-B
City-St-Zip: BOCA RATON, FL 33431

Title: TSC () Delete
Name: LIEBERMAN, RICHARD W.
Address: 4001 N OCEAN BV 806-B
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVD (X) Change () Addition
Name: LIEBERMAN, RICHARD W.
Address: 4001 N OCEAN BV B-806
City-St-Zip: BOCA RATON, FL 33431

Title: M (X) Change () Addition
Name: LIEBERMAN, RICHARD W.
Address: 4001 N OCEAN BV B-806
City-St-Zip: BOCA RATON, FL 33431

Title: TSC (X) Change () Addition
Name: LIEBERMAN, RICHARD W.
Address: 4001 N OCEAN BV B-806
City-St-Zip: BOCA RATON, FL 33431

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: RICHARD W. LIEBERMAN, MD

PVD

04/23/2005

Electronic Signature of Signing Officer or Director

Date