## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H39823

Entity Name: GALCERAN, MEYER, AND HERNANDEZ, M.D., P.A.

FILED Apr 24, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

7051 DR PHILLIPS BLVD, SUITE 1 7301 STONEROCK CIRCLE ORLANDO, FL 328198144 US 0RLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

7051 DR PHILLIPS BLVD., SUITE 1 7301 STONEROCK CIRCLE ORLANDO, FL 328198144 US ORLANDO, FL 32819 US

FEI Number: 59-2484966 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GALCERAN, M. J
7051 DR PHILLIPS BLVD
SUITE 1
ORLANDO, FL 32819 US
GALCERAN, M. J
7301 STONEROCK CIRCLE
ORLANDO, FL 32819 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: 04/24/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name:GALCERAN, MANUEL J.,Name:GALCERAN, MANUEL J.,Address:7051 DR PHILLIPS BLVDAddress:7301 STONEROCK CIRCLE

City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32819

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: MEYER. ROBERT M Name: MEYER. ROBERT M

Address: 7051 DR PHILLIPS BLVD., STE. #1 Address: 7301 STONEROCK CIRCLE City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32819

Title: S () Delete Title: S (X) Change () Addition

Name:HERNANDEZ, APARNAName:HERNANDEZ, APARNAAddress:7051 DR PHILLIPS BLVD, STE 1Address:7301 STONEROCK CIRCLECity-St-Zip:ORLANDO, FL 32819City-St-Zip:ORLANDO, FL 32819

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: M J GALCERAN PRES 04/24/2006