## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H61391

City-St-Zip: BRADENTON, FL 34209

Entity Name: DR. SCOTT LLOYD MCCLURE, P.A.

FILED Mar 30, 2006 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
4708 26TH	LLOYD MCC   ST. WEST ON, FL 3420				
Current M	ailing Addre	ss:	New Mailing Address:	New Mailing Address:	
% SCOTT LLOYD MCCLURE 4708 26TH ST. WEST BRADENTON, FL 34207			1215 51ST ST. WEST	% SCOTT MCCLURE DDS PA 1215 51ST ST. WEST BRADENTON, FL 34209	
FEI Number:	59-2657853	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of N	lame and Address of New Registered Agent:	
4708 26TH	E, SCOTT LLC IST. WEST ON, FL 3420				
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.					
SIGNATUR	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Can	npaign Financir	g Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name:	,	) Delete COTT LLOYD, , DR ET MEST	Title: ( ) Name: Address:	) Change ()Addition	

City-St-Zip:

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: DR SCOTT LLOYD MCCLURE D 03/30/2006