2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J06897

Entity Name: LAURENCE RAIFORD, M.D., P.A.

FILED Apr 07, 2008 Secretary of State

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

% LAURENCE RAIFORD LAURENCE RAIFORD 1017 EXETER A 1017 EXETER A

BOCA RATON, FL 334342961 BOCA RATON, FL 334342961

Current Mailing Address: New Mailing Address:

% LAURENCE RAIFORD LAURENCE RAIFORD 1017 EXETER A 1017 EXETER A

BOCA RATON, FL 334342961 BOCA RATON, FL 334342961

FEI Number: 59-2681540 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:

RAIFORD, LAURENCE
1017 EXETER A
1017 EXETER A
1017 EXETER A

BOCA RATON, FL 33434 US BOCA RATON, FL 33434 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: LAURENCE RAIFORD 04/07/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition RAIFORD, LAURENCE, RAIFORD, LAURENCE, Name: Name: 1017 EXETER A 1017 EXETER A Address: Address: City-St-Zip: BOCA RATON, FL City-St-Zip: BOCA RATON, FL 33434

I hereby certify that the information supplied with this filing does not qualify 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: LAURENCE RAIFORD PRES 04/07/2008