

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J68488

FILED
Mar 07, 2006
Secretary of State

Entity Name: TODD R. BURMEISTER, D.P.M., P.A.

Current Principal Place of Business:

681 GOODLETTE RD
SUITE 160
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

681 GOODLETTE RD
SUITE 160
NAPLES, FL 34102 US

New Mailing Address:

FEI Number: 59-2800428 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERIO & HALL
44 W. FLAGLER STREET
SUITE 2450
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BURMEISTER, TODD R.,
Address: 681 GOODLETTE RD, STE160
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURMEISTER, TODD R.,
Address: 681 GOODLETTE RD, STE160
City-St-Zip: NAPLES, FL 34102 US

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: TODD R BURMEISTER

PD

03/07/2006

Electronic Signature of Signing Officer or Director

_____ Date