2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # J84416

1. Entity Name

PARK PLACE PROFESSIONAL CENTER, INC.



Principal Place of Business

303 NINTH STREET WEST

SUITE 201 BRADENTON, FL 34205 US

Mailing Address

303 NINTH STREET WEST

SUITE 201

BRADENTON, FL 34205 US

No Chg-P

CR2E034 (11/05)

FILED

Apr 11, 2006 8:00 am Secretary of State

04-11-2006 90118 046 ***150.00

60026905

02072006 4. FEI Number 65-0015840

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSKIRK, FRANK A. 303 NINTH STREET WEST **SUITE 201** BRADENTON EL 34205

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| DIVIDENTION, LE 04200 | | | | | |
|---|---|---------------------------------|--------------------------------|----------------------------|--|
| | named entity submits this statement for the pu ons of registered agent. | rpose of changing its registere | ed office or re | egistered agent, or bo | oth, in the State of Florida. I am familiar with, and accept |
| SIGNATURE_ | Signature, typed or printed name of registered agent and title if a | applicable. (NOTE: Registered | d Agent signature | required when reinstating) | DATE |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution. | | icing | \$5.00 May Be Added to Fees | | |
| 10. | OFFICERS AND DIRECT | FORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PSD BUSKIRK, FRANK A. 303 NINTH STREET WEST SUITE 20,1 BRADENTON, FL 34205 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T BUSKIRK, FRANK A. 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205 | | | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | |
| 12. I hereby | certify that the information supplied with this fill | ng does not qualify for the ex | emptions co | ntained in Chapter 11 | 19, Florida Statutes. I further certify that the information |

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

Daytime Phone #