2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# J89877

Entity Name: H. D. SHULL, JR., M.D., P.A.

Current Principal Place of Business:

529 E CENTRAL AVE
P.O. BOX 9003
WINTER HAVEN, FL 338803051 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 9003
WINTER HAVEN, FL 338803051 US

New Mailing Address:

FEI Number: 59-2837575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHULL, H. D., JR.
529 E CENTRAL AVE
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

SHULL, HARRY DEAN PRESIDE
529 E CENTRAL AVE
WINTER HAVEN, FL 33881 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: HARRY DEAN SHULL JR MD 04/26/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: SHULL, H. D., JR.,
Address: 529 E CENTRAL AVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: STD ( ) Delete
Name: SHULL, JUDITH,
Address: 1118 CYPRESS POINT W
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: SHULL, JR., H. DEAN
Address: 529 E CENTRAL AVENUE
City-St-Zip: WINTER HAVEN, FL 33880

Title: STD (X) Change ( ) Addition
Name: SHULL, JUDITH N
Address: 1118 CYPRESS POINT W
City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JUDITH N SHULL TREA 04/26/2004
Electronic Signature of Signing Officer or Director Date