2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J89877

FILED Jul 18, 2006 Secretary of State

Entity Nam	ie: H. D. SH	ULL, JR., M.D., P.A.					
Current Principal Place of Business:				New Principal Place of Business:			
529 E CENT P.O. BOX 9 WINTER HA	003	38803051 US					
Current Mailing Address:				New Mailing Address:			
PO BOX 90 WINTER HA		88803051 US					
FEI Number:	59-2837575	FEI Number Applied For()	FEI Nur	nber Not Applicable ()	Certif	ficate of Status Desired	(()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SHULL, HARRY DEAN PRESIDE 529 E CENTRAL AVE WINTER HAVEN, FL 33881 US				SHULL, JR, H. DEAN 529 E CENTRAL AVI WINTER HAVEN, FL	≣	US	
The above in the State		submits this statement for the p	ourpose c	of changing its register	ed office c	or registered agent, c	or both,
SIGNATURE: H DEAN SHULL JR						07/18/2006	
	Electro	nic Signature of Registered Age	ent			Date	
Election Cam	paign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DP (SHULL, JR., H 529 E CENTRA WINTER HAVE	AL AVENUE		Title: Name: Address: City-St-Zip:	() Chang	ge () Addition	
Title: Name: Address: City-St-Zip:	STD (SHULL, JUDIT 1118 CYPRES WINTER HAVE	S POINT W		Title: Name: Address: City-St-Zip:	() Chang	ge () Addition	

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: DEAN SHULL Ρ 07/18/2006