

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K63306

FILED  
Feb 05, 2004  
Secretary of State

Entity Name: TREASURE COAST EAR, NOSE & THROAT, P.A.

## Current Principal Place of Business:

844 E. OCEAN BLVD.  
STUART, FL 34994 US

## New Principal Place of Business:

2221 SE OCEAN BLVD  
SUITE 300  
STUART, FL 34996 US

## Current Mailing Address:

844 E. OCEAN BLVD.  
SUITE 400  
STUART, FL 34994 US

## New Mailing Address:

2221 SE OCEAN BLVD  
SUITE 300  
STUART, FL 34996 US

FEI Number: 65-0095341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHARKEY, DANIEL E.  
844 E. OCEAN BLVD.  
STUART, FL 34994 US

## Name and Address of New Registered Agent:

SHARKEY, DANIEL E.  
2221 SE OCEAN BLVD  
SUITE 300  
STUART, FL 34996 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:

02/05/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SHARKEY, DANIEL E.,  
Address: 844 E. OCEAN BLVD.  
City-St-Zip: STUART, FL

Title: MGR ( ) Delete  
Name: SABOL MD, STUART J  
Address: 844 E OCEAN BLVD  
City-St-Zip: STUART, FL 34994

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHARKEY, DANIEL E.,  
Address: 2221 SE OCEAN BLVD SUITE 300  
City-St-Zip: STUART, FL 34996

Title: P (X) Change ( ) Addition  
Name: SABOL MD, STUART J  
Address: 2221 SE OCEAN BLVD SUITE 300  
City-St-Zip: STUART, FL 34996

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: DANIEL E SHARKEY MD

P

02/05/2004

Electronic Signature of Signing Officer or Director

Date