## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K85042

Entity Name: JESSE A. KANE, M.D., P.A.

FILED Jul 23, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

C/O JESSE A KANE 3820 TAMPA ROAD, STE 202 PALM HARBOR, FL 34684

**New Mailing Address: Current Mailing Address:** 

C/O JESSE A KANE P.O. BOX 732

3820 TAMPA ROAD, STE 202 PALM HARBOR, FL 34682

PALM HARBOR, FL 34684

FEI Number: 59-2948680 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KANE, JESSE KANE, JESSE 3820 TAMPA RD P.O. BOX 732

SUITE 202 PALM HARBOR, FL 34682 US

PALM HARBOR, FL 34684 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: JESSE A. KANE 07/23/2004

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

KANE, JESSE A. Name: Name: KANE, JESSE A. 3820 TAMPA RD, STE 202 P.O. BOX 732 Address: Address:

City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34682

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 Statutés. 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: JESE A. KANE DR 07/23/2004