

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M41267

FILED  
Jan 25, 2005  
Secretary of State

Entity Name: KENDALL OAKS PROFESSIONAL CENTER, INC.

**Current Principal Place of Business:**

6401 SW 87 AVE  
SUITE 212  
MAIMI, FL 33173 US

**New Principal Place of Business:**

**Current Mailing Address:**

6401 SW 87 AVE  
SUITE 212  
MAIMI, FL 33173 US

**New Mailing Address:**

FEI Number: 59-2745328      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DAVIDOW, HOWARD B  
842 BLACKBIRD COURT  
ROCKLEDGE, FL 32955 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: MCKEAN, RANDOLPH A  
Address: 6401 SW 87 AVE., SUITE 212  
City-St-Zip: MIAMI, FL 33173

Title: PD ( ) Delete  
Name: DAVIDOW, HOWARD B  
Address: 842 BLACKBIRD CT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD ( ) Delete  
Name: SCHWARTZ, BEN  
Address: 4600 OLYMPIC WAY  
City-St-Zip: EVERGREEN, CO 80439

Title: VPD ( ) Delete  
Name: KEEN, JAMES W  
Address: 14945 NW 25TH COURT  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RANDOLPH A MCKEAN

DT

01/25/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date