2006 FOR PROFIT CORPORATION

FILED ANNUAL REPORT Jan 13, 2006 08:00 AM **DOCUMENT # M89799 Secretary of State** 1. Entity Name JAY A. KEESLING, O.D., P.A. Mailing Address Principal Place of Business 200 S. NOVA RD 200 S. NOVA RD SUITE A SUITE A ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 01032006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2897273 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Π 6. Name and Address of Current Registered Agent KEESLING, JAY A DO NOT WRITE 200 S. NOVA RD SUITE A IN THIS SPACE ORMOND BEACH, FL 32174 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature regulted when reinstation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 13 \$150.00 After May 1, 2006 Fee will be \$550.00 U00000385941 Trust Fund Contribution. 01/18/06-80036-014 150.00 10. OFFICERS AND DIRECTORS TITLE NAME KEESLING, JAY A O.D. STREET ADDRESS 200 S. NOVA RD ORMOND BEACH, FL 32174 CITY-ST-ZIP TITLE STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under ceth; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS

-1-06