

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031201

FILED
Jan 27, 2004
Secretary of State

Entity Name: VINCENT PAUL WILSON, M.D., P.A.

Current Principal Place of Business:

301 S. MAITLAND AVE., SUITE B
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

301 S. MAITLAND AVE., SUITE B
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 59-3631913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, VINCENT PAUL
301 S. MAITLAND AVE., SUITE B
MAITLAND, FL 32751 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: DR () Delete
Name: WILSON, VINCENT PAUL
Address: 1848 BLAINE TERRACE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: WILSON, VINCENT PAUL
Address: 5729 OAK LAKE TRAIL
City-St-Zip: OVIEDO, FL 32765

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: VINCENT PAUL WILSON

DR

01/27/2004

Electronic Signature of Signing Officer or Director

Date