

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000066852

FILED
Sep 14, 2005
Secretary of State

Entity Name: SON SHINE FOOT AND ANKLE CENTER, PA

Current Principal Place of Business:

10301 HAGEN RANCH RD.
#5
BOYNTON BEACH, FL 33437

Current Mailing Address:

10301 HAGEN RANCH RD.
#5
BOYNTON BEACH, FL 33437

New Principal Place of Business:

1405 SE GOLDTREE DR
C
PORT ST LUCIE, FL 34952

New Mailing Address:

1405 SE GOLDTREE DR
C
PORT ST LUCIE, FL 34952

FEI Number: 65-1023525

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ERRICO, ALBERT A
10301 HAGEN RANCH RD #5
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

D'ERRICO, ALBERT A
1405 SE GOLDTREE DR
C
PORT ST LUCIE, FL 34952 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: DR. ALBERT A. D'ERRICO

09/14/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: D'ERRICO, ALBERT A
Address: 479 CAPISTSAND DR
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: D'ERRICO, LORETHA
Address: 479 CAPISTSAND DR
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: D'ERRICO, ALBERT A
Address: 1513 SE HOLYROOD LANE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: VP (X) Change () Addition
Name: D'ERRICO, LORETHA
Address: 1513 SE HOLYROOD LANE
City-St-Zip: PORT ST LUCIE, FL 34952

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: LORETHA D'ERRICO

VP

09/14/2005

Electronic Signature of Signing Officer or Director

Date