

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001323

FILED  
Apr 26, 2006  
Secretary of State

**Entity Name:** TAMPA BAY JAW AND FACIAL SURGERY, P.A.

**Current Principal Place of Business:**

14005 N DALE MABRY HWY  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

16011 NEBRASKA AVE. N, STE 106  
LUTZ, FL 335496158

**New Mailing Address:**

**FEI Number:** 59-3687020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONTRYMAN, JOHN A CPA  
16011 NEBRASKA AVE. N, STE 106  
LUTZ, FL 335496158 US

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

CONTRYMAN, JOHN A CPA  
16011 NEBRASKA AVENUE NORTH  
SUITE 106  
LUTZ, FL 335496158 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:** JOHN A. COUNTRYMAN, CPA

04/26/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPS ( ) Delete  
**Name:** MRUGALA, CHRISTINE M  
**Address:** 14005 N DALE MABRY HWY  
**City-St-Zip:** TAMPA, FL 33618

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

**Title:** DPST (X) Change ( ) Addition  
**Name:** MRUGALA, CHRISTINE M  
**Address:** 14005 N DALE MABRY HWY  
**City-St-Zip:** TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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:** JOHN A. COUNTRYMAN, CPA

CPA

04/26/2006

Electronic Signature of Signing Officer or Director

Date