

**2006 FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000006104

1. Entry Name
A1 URGENT CARE & FAMILY PRACTICE CENTER, KEY
LARGO, P.A.



Principal Place of Business
101451 O/S HWY
#13
KEY LARGO, FL 33037

Mailing Address
101451 O/S HWY
#13
KEY LARGO, FL 33037



01122006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-1067942

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RAE, IAN N
101451 O/S HWY
#13
KEY LARGO, FL 33037

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	RAE, IAN N
STREET ADDRESS	101451 O/S HWY
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	VS
NAME	RAE, MARTHA M
STREET ADDRESS	101451 O/S HWY
CITY-ST-ZIP	KEY LARGO, FL 33037
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

101000466874
03/23/06-80029-002 159.75

**DO NOT WRITE
IN THIS SPACE**

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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *MARTHA M. RAE* VS *MARTHA M. RAE*

3-10-2006

305-453-300