2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P01000016335

Entity Name: MITCHELL L. KAPLAN, D.C., P.A.

Current Principal Place of Business:	**New Principal Place of Business:**
1251 S HICKORY ST MELBOURNE, FL 32901	

Current Mailing Address:	**New Mailing Address:**
PO BOX 360914 MELBOURNE, FL 329360914	

FEI Number: 59-3696296 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
KAPLAN, MITCHELL L PO BOX 360914 MELBOURNE, FL 329360914 US	KAPLAN, MITCHELL L 150 CAROLINA AVE MELBOURNE, FL 32935 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: MITCHELL KAPLAN 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:		**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**	
Title:	PVST ( ) Delete	Title:	( ) Change ( ) Addition
Name:	KAPLAN, MITCHELL L	Name:	
Address:	PO BOX 360914	Address:	
City-St-Zip:	MELBOURNE, FL 329350914	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify 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: MITCHELL KAPLAN PVTS 04/30/2007

Electronic Signature of Signing Officer or Director Date