

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000048850

Entity Name: BEACHES NEUROLOGY, P.A.

FILED  
Mar 28, 2005  
Secretary of State

## Current Principal Place of Business:

1370 13TH AVENUE SOUTH SUITE 215  
JACKSONVILLE BEACH, FL 32250

## New Principal Place of Business:

## Current Mailing Address:

1370 13TH AVENUE SOUTH SUITE 215  
JACKSONVILLE BEACH, FL 32250

## New Mailing Address:

FEI Number: 59-3718359

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAIRBANKS, RANDAL C  
217 PONTE VEDRA PARK DRIVE SUITE 200  
PONTE VEDRA BEACH, FL 32082 US

## Name and Address of New Registered Agent:

FAIRBANKS, RANDAL C  
76 SOUTH LAURA STREET  
SUITE 1700  
JACKSONVILLE, FL 32202 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:

03/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SNYDER, THOMAS M MD  
Address: 1370 13TH AVENUE SOUTH SUITE 215  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: THOMAS M. SNYDER

D

03/28/2005

Electronic Signature of Signing Officer or Director

Date