2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000097635

City-St-Zip:

MIAMI, FL 33138

Entity Name: JILL A. REED, D.M.D., P.A.

FILED Jan 19, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
660 NE 95 MIAMI SH	ST ORES, FL 33°	138			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
660 NE 95 MIAMI SH	ST ORES, FL 33°	138			
FEI Number	: 65-1144611	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
	CHRISTOPHE CAYNE BLVD 33161 US				
	named entity e of Florida.	submits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ager	nt	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	PST (REED, JILL A 660 NE 95ST) Delete	Title: Name: Address:	() Change () Addition	

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: JILL A. REED D.M.D. PST 01/19/2005