

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000106696

FILED
Apr 29, 2005
Secretary of State

Entity Name: PROFESSIONAL BOUNDARIES, INC.

Current Principal Place of Business:

345 SKYLAR RUN
DESTIN, FL 32541

New Principal Place of Business:

17 SHELL AVE SE
A4
FORT WALTON BEACH, FL 32548

Current Mailing Address:

345 SKYLAR RUN
DESTIN, FL 32541

New Mailing Address:

17 SHELL AVE SE
A4
FORT WALTON BEACH, FL 32548

FEI Number: 02-0589175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHENTHAL, STEPHEN J M.D.
345 SKYLAR RUN
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

SCHENTHAL, STEPHEN J M.D.
17 SHELL AVE SE
A4
FORT WALTON BEACH, FL 32548 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:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: SCHENTHAL, STEPHEN J MD
Address: 345 SKYLAR RUN
City-St-Zip: DESTIN, FL 32541

Title: SEC () Delete
Name: SCHENTHAL, STEPHEN J MD
Address: 345 SKYLAR RUN
City-St-Zip: DESTIN, FL 32541

Title: TRES () Delete
Name: SCHENTHAL, STEPHEN J MD
Address: 345 SKYLAR RUN
City-St-Zip: DESTIN, FL 32541

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SCHENTHAL, STEPHEN J MD
Address: 17 SHELL AVE SE, A4
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SEC (X) Change () Addition
Name: SCHENTHAL, STEPHEN J MD
Address: 17 SHELL AVE, A4
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TRES (X) Change () Addition
Name: SCHENTHAL, STEPHEN J MD
Address: 17 SHELL AVE, A4
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: V () Change (X) Addition
Name: SKIPPER, GREGORY E MD
Address: 19 S JACKSON ST
City-St-Zip: MONTGOMERY, AL 36104

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: STEPHEN J SCHENTHAL

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04/29/2005

Electronic Signature of Signing Officer or Director

Date