

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000012866

FILED
Apr 04, 2005
Secretary of State

Entity Name: MARIA JOCELYN CARREON, M.D., P.A.

Current Principal Place of Business:

2883 KNOLLWOOD CT.
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2883 KNOLLWOOD CT.
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 01-0612153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARREON, MARIA JOCELYN
2883 KNOLLWOOD CT.
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARREON, MARIA JOCELYN
Address: 2883 KNOLLWOOD CT.
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CARREON, MARIA JOCELYN
Address: 2883 KNOLLWOOD CT.
City-St-Zip: CLEARWATER, FL 33761

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: MARIA JOCELYN CARREON

PRES

04/04/2005

Electronic Signature of Signing Officer or Director

Date