

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000016417

Entity Name: IAN BOYKIN, M.D., P.A.

FILED
Mar 23, 2006
Secretary of State

Current Principal Place of Business:

2100 NEBRASKA AVE SUITE 205
FORT PIERCE, FL 34950

New Principal Place of Business:

2100 NEBRASKA AVE SUITE 201
FORT PIERCE, FL 34950

Current Mailing Address:

2100 NEBRASKA AVE SUITE 205
FORT PIERCE, FL 34950

New Mailing Address:

2100 NEBRASKA AVE SUITE 201
FORT PIERCE, FL 34950

FEI Number: 01-0598341

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYKIN, IAN
2100 NEBRASKA AVE SUITE 205
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

BOYKIN, IAN
2100 NEBRASKA AVE SUITE 201
FORT PIERCE, FL 34950 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: IAN BOYKIN MD

03/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().**OFFICERS AND DIRECTORS:**

Title: PD () Delete
Name: BOYKIN, IAN
Address: 2100 NEBRASKA AVE SUITE 205
City-St-Zip: FORT PIERCE, FL 34950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BOYKIN, IAN
Address: 2100 NEBRASKA AVE SUITE 201
City-St-Zip: FORT PIERCE, FL 34950

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: IAN BOYKIN MD

PRES

03/23/2006

Electronic Signature of Signing Officer or Director

Date