

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078910

FILED
Jan 04, 2006
Secretary of State

Entity Name: DOCTORS INLET PEDIATRICS AND PRIMARY CARE, P.A.

Current Principal Place of Business:

2569 CR 220, STE 204
SUITE 204
MIDDLEBURG, FL 32068

New Principal Place of Business:

Current Mailing Address:

2569 CR 220
SUITE 204
MIDDLEBURG, FL 32068

New Mailing Address:

FEI Number: 14-1837982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILAK, SUWARNA M
2569 CR 220, STE 204
MIDDLEBURG, FL 32068 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: TILAK, SUWARNA MD
Address: 3457 MAINARD BRANCH COURT
City-St-Zip: ORNAGE PARK, FL 32003

Title: D () Delete
Name: TILAK, MILIND MD
Address: 3457 MAINARD BRANCH COURT
City-St-Zip: ORNAGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: SUWARNA TILAK

D

01/04/2006

Electronic Signature of Signing Officer or Director

Date