

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095660

Entity Name: ALEXANDER M. EATON, M.D., P.A.

FILED
Apr 27, 2006
Secretary of State

Current Principal Place of Business:

2675 WINKLER AVE
205
FT MYERS, FL 33901

New Principal Place of Business:

1567 HAYLEY LANE
SUITE 101
FT MYERS, FL 33907

Current Mailing Address:

2675 WINKLER AVE
205
FT MYERS, FL 33901

New Mailing Address:

1567 HAYLEY LANE
SUITE 101
FT MYERS, FL 33907

FEI Number: 16-1625376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EATON, ALEXANDER M MD
2675 WINKLER AVE #205
FT MYERS, FL 33901 US

Name and Address of New Registered Agent:

EATON, ALEXANDER M MD
1567 HAYLEY LANE
SUITE 101
FT MYERS, FL 33907 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:

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: EATON, ALEXANDER M MD
Address: 2675 WINKLER AVE #205
City-St-Zip: FT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: EATON, ALEXANDER M MD
Address: 1567 HAYLEY LANE
City-St-Zip: FT MYERS, FL 33907

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: ALEXANDER M EATON MD

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date