2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# P02000112976

Entity Name: DAYTONA CLINIC, INC.

Current Principal Place of Business:

595 WEST GRANADA BLVD SUITE A
ORMOND BEACH, FL 32174

New Principal Place of Business:

1890 LPGA BOULEVARD, SUITE 260
DAYTONA BEACH, FL 32117

Current Mailing Address:

595 WEST GRANADA BLVD SUITE A
ORMOND BEACH, FL 32174

New Mailing Address:

1890 LPGA BOULEVARD, SUITE 260
DAYTONA BEACH, FL 32117

FEI Number: 43-1981725 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWEET, JEFFREY C
595 WEST GRANADA BLVD SUITE A
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

PANKRATZ, VONNA M
1890 LPGA BOULEVARD, SUITE 260
DAYTONA BEACH, FL 32117 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: VONNA M. PANKRATZ 04/28/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SEVIGNY, STEPHEN M.D.
Address: 1890 LPGA BLVD., SUITE 110
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VPD ( ) Delete
Name: CARBIENER, PAMELA M.D.
Address: 1890 LPGA BLVD., SUITE 160
City-St-Zip: DAYTONA BEACH, FL 32114

Title: S/T ( ) Delete
Name: GILLESPY, ALBERT W M.D.
Address: 1075 MASON AVENUE
City-St-Zip: DAYTONA BEACH, FL 32117

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CARBIENER, PAMELA M.D.
Address: 1890 LPGA BLVD., SUITE 160
City-St-Zip: DAYTONA BEACH, FL 32117

Title: VPD (X) Change ( ) Addition
Name: GILLESPY, ALBERT W M.D.
Address: 1890 LPGA BLVD., SUITE 240
City-St-Zip: DAYTONA BEACH, FL 32117

Title: SEC (X) Change ( ) Addition
Name: LOESSIN, SCOTT M.D.
Address: 1890 LPGA BLVD., SUITE 150
City-St-Zip: DAYTONA BEACH, FL 32117

Title: TRES ( ) Change (X) Addition
Name: ST. JAMES, LUTHER M.D.
Address: 1890 LPGA BOULEVARD, SUITE 170
City-St-Zip: DAYTONA BEACH, FL 32117

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: PAMELA CARBIENER, M.D. PD 04/28/2006
Electronic Signature of Signing Officer or Director Date