2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133821

Entity Name: JAMES J. O'MAILIA, M.D., P.A.

FILED Jan 09, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

Current Mailing Address: New Mailing Address:

 1553 B MATTHEW DR
 1553 MATTHEW DR

 FT MYERS, FL 33907
 FT MYERS, FL 33907

FEI Number: 04-3734550 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 O'MAILIA, M.D., JAMES J
 O'MAILIA, M.D., JAMES J

 1553 B MATTHEW DR
 1553 MATTHEW DR

 FT MYERS, FL 33907 US
 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: 01/09/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

P () Delete Title: DP (X) Change () Addition

 Name:
 O'MAILIA, M.D., JAMES J
 Name:
 O'MAILIA, M.D., JAMES J

 Address:
 1553-B MATTHEW DRIVE
 Address:
 1553 MATTHEW DRIVE

 City-St-Zip:
 FT MYERS, FL 33907
 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: JAMES J. O'MAILIA, MD DP 01/09/2006