2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 12, 2005
Secretary of State

DOCUMENT# P03000002021

Entity Name: GREAT SOUTH BAY UROLOGY, P.A.

Current Principal Place of Business:

1781 GARDEN STREET
TITUSVILLE, FL 32796

New Principal Place of Business:

2202 SOUTH BABCOCK STREET
SUITE 101
MELBOURNE, FL 32901

Current Mailing Address:

1781 GARDEN STREET
TITUSVILLE, FL 32796

New Mailing Address:

2202 SOUTH BABCOCK STREET
SUITE 101
MELBOURNE, FL 32901

FEI Number: 04-3739721 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOUGHLIN, MATTHEW M.D.
1781 GARDEN STREET
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

LOUGHLIN, MATTHEW M.D.
2202 SOUTH BABCOCK STREET
SUITE 101
MELBOURNE, FL 32901 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: MATTHEW W LOUGHLIN 08/12/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LOUGHLIN, MATTHEW M.D.
Address: 1781 GARDEN STREET
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LOUGHLIN, MATTHEW M.D.
Address: 2202 SOUTH BABCOCK STREET, SUITE 101
City-St-Zip: MELBOURNE, FL 32901

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MATTHEW W LOUGHLIN MD 08/12/2005
Electronic Signature of Signing Officer or Director Date