

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000007710

FILED  
Feb 12, 2006  
Secretary of State

Entity Name: MAUREEN WHELIHAN, M.D., P.A.

## Current Principal Place of Business:

3537 FOREST HILL BLVD  
WEST PALM BEACH, FL 33406

## New Principal Place of Business:

## Current Mailing Address:

13833 WELLINGTON TRACE E-4  
PMB 217  
WELLINGTON, FL 33414

## New Mailing Address:

FEI Number: 56-2321147      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHNEIDER, JOHN C.  
1550 CLEARLAKE CENTRE  
250 AUSTRALIAN AVENUE SOUTH  
WEST PALM BEACH, FL 33401 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: DR ( ) Delete  
Name: WHELIHAN, MAUREEN PRES  
Address: 13833 WELLINGTON TRACE E-4 PMB 217  
City-St-Zip: WELLINGTON, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MAUREEN WHELIHAN MD

PRES

02/12/2006

Electronic Signature of Signing Officer or Director

Date