2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000026694

1. Entity Name

GEORGE M JOSEPH, MD, PA



Principal Place of Business

1579 THE GREEN WAY

SUITE 18

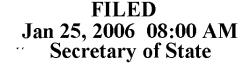
JACKSONVILLE BEACH, FL 32250

Mailing Address

1579 THE GREEN WAY

SUITE 18

JACKSONVILLE BEACH, FL 32250





CR2E034 (11/05)

904)280-3112

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4. FEI Number 59-1862610	Applied For Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PLEIMAN, THOMAS C JR. 9471 BAYMEADOWS ROAD SUITE 308 JACKSONVILLE, FL 32256

SIGNATURE:

DO NOT WRITE IN THIS SPACE

No Chg-P

01202006

	named entity submits this statement for the prions of registered agent.	urpose of changing its req	gistered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept		
SIGNATURE_	Signature, typed or printed name of registered agent and title	spolicable. (NOTE, Re	egistered Agent signaturi	a required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Trust Fund Contribution		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS			<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOSEPH, GEORGE M 1579 THE GREENS WAY, SUITE 18 JACKSONVILLE BEACH, FL 32250				03/01/06-80044-005 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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TITLE NAME STREET ADDRESS CITY-ST-ZIP							
indicated of the cor	on this report or supplemental report is true a	and accurate and that my I to execute this report as	signature shall ha	ve the same legal effe	 Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if 		