


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2007 08:00 AM
Secretary of State

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| DOCUMENT # P03000028366 |  |
| 1. Entity Name DENNIS MCDONAGH, M.D., P.A. | |

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|---|---|
| Principal Place of Business 2636 FOREST CIRCLE JACKSONVILLE, FL 32257 | Mailing Address 2636 FOREST CIRCLE JACKSONVILLE, FL 32257 |
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01102007 No Chg-P CR2E034 (11/05)

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|---|---------------------------------------|
| 4. FEI Number 41-2084086 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

ELEFANT, FRED
 1650 PRUDENTIAL DR STE 105
 JACKSONVILLE, FL 32207

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

00000589967
 01/18/07-80038-003 150.00

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MCDONAGH, DENNIS 2636 FOREST CIR JACKSONVILLE, FL 32257 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dennis J. McDonagh Date: 1/12/07 Daytime Phone #: 904 549-8228

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dennis J. McDonagh