2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000030074

Entity Name: JILL FOXMAN, P.A.

FILED Feb 28, 2006 Secretary of State

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

100 E. LINTON BLVD

108B 213 B

DELRAY BEACH, FL 33483 DELRAY BEACH, FL 33483

Current Mailing Address: New Mailing Address:

910 NE 2ND AVE 910 NE 2ND AVE

DELRAY BEACH, FL 33446 DELRAY BEACH, FL 33444

FEI Number: 55-0822307 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:

FOXMAN, JILL FOXMAN, JILL

100 E. LINTON BLVD #108B 100 E. LINTON BLVD #213B DELRAY BEACH, FL 33483 US DELRAY BEACH, FL 33483 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: DR. JILL FOXMAN 02/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR () Delete Title: DR (X) Change () Addition

Name: FOXMAN, JILL Name: FOXMAN, JILL

 Address:
 100 E. LINTON BLVD #108B
 Address:
 100 E. LINTON BLVD #213B

 City-St-Zip:
 DELRAY BEACH, FL 33483
 City-St-Zip:
 DELRAY BEACH, FL 33483

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: JILL FOXMAN DR. 02/28/2006