## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000048204

Entity Name: LINDA K. FOX, M.D., P.A.

FILED Jan 09, 2007 Secretary of State

Current P	rincipal Place	of Business:	New Principal Place of Business:				
619 COVE	•						
PANAMA	CITY, FL 3240	1					
Current Mailing Address:			New Mailing Address:				
619 COVE PANAMA (	EBLVD CITY, FL 3240	1					
FEI Number: 01-0781600 FEI Number Applied For ( )		FEI Number Not Applicable ( )		Certificate of Status Desired ( )			
Name and	l Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:				
	RRICK D WOOD DR VEN, FL 32444	US					
	named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, o	r both,	
SIGNATUI	RE:						
	Electron	ic Signature of Registered Ag	ent		Date		
Election Car	mpaign Financing	Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	S () NEWELL, PAT 7006 HUGH DR PANAMA CITY,		Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	D ( FOX, LINDA I 4737 BAYWO LYNN HAVEN	OD DR		

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: DERRICK FOX RA 01/09/2007