2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 23, 2005 08:00 AM Secretary of State

DOCUMENT # P03000057833 1. Entity Name GLEN E. SUTHERLAND, M.D., P.A.	
Principal Place of Business Mailing Address 6075 NW 967H DRIVE 6075 NW 967H DRIVE PARKLAND, FL 33076 PARKLAND, FL 33076	. (
DO NOT WRITE IN THIS SPA	02022005 No Chg-P CR2E034 (10/03) 4. FEI Number
BSPA CORPORATE SERVICES, INC. 350 EAS LAS OLAS BLVD. SUITE 1000 FT. LAUDERALE, FL 33301	DO NOT WRITEIN THIS SPACE
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 Signature, typod or printed name of registered agent and the if applicable INOTE Registored Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Final Trust Fund Contribution.	
10. OFFICERS AND DIRECTORS TITLE D NAME SUTHERLAND, GLEN E MD STREET ADDRESS 6075 NW 96TH DRIVE CITY-ST-ZIP PARKLAND, FL 33076	000000239825
TITLE NAME STREET ADDRESS CITY - ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 of 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.	