2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059785

Entity Name: DOUGLAS L. NELSON, D.O., P.A.

FILED Apr 07, 2004 Secretary of State

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

4255 W. HUMPHREY ST., #321 16622 N. DALE MABRY HWY.

TAMPA, FL 33614 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

4255 W. HUMPHREY ST., #321 TAMPA, FL 33614

FEI Number: 54-2114570 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:

WALDER, LYNNE ESQ. 777 SOUTH HARBOUR ISLAND BLVD., STE. 128

TAMPA, FL 33602 US

SUITE 128 TAMPA, FL 33602 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: 04/07/2004 Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

WALDER, LYNNE ESQ

777 SOUTH HARBOUR ISLAND BLVD.

Title: () Delete Title: (X) Change () Addition NELSON, DOUGLAS L NELSON, DOUGLAS L Name: Name: 4255 W. HUMPHREY ST., #321 16622 N. DALE MABRY HWY. Address: Address:

City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. 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: DOUGLAS L. NELSON 04/07/2004 DR.