

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067447

FILED
Apr 27, 2004
Secretary of State

Entity Name: PROTONCARE OF FLORIDA, INC.

Current Principal Place of Business:

50 N. LAURA STREET., SUITE 2500
JACKSONVILLE, FL 32202

New Principal Place of Business:

50 N. LAURA STREET, SUITE 2500
JACKSONVILLE, FL 32202 US

Current Mailing Address:

50 N. LAURA STREET., SUITE 2500
JACKSONVILLE, FL 32202

New Mailing Address:

50 N. LAURA STREET, SUITE 2500
JACKSONVILLE, FL 32202 US

FEI Number: 04-3762988

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOTOLAW, INC.
50 N. LAURA STREET., SUITE 2500
JACKSONVILLE, FL 32202

Name and Address of New Registered Agent:

MOTOLAW, INC.
50 N. LAURA STREET, SUITE 2500
JACKSONVILLE, FL 32202 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:

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WESS, BERNARD P JR
Address: 790 HIGHLAND AVENUE
City-St-Zip: NEEDHAM HEIGHTS, MA 02494

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P () Change (X) Addition
Name: WESS, BERNARD P JR
Address: 790 HIGHLAND AVENUE
City-St-Zip: NEEDHAM HEIGHTS, MA 02494 US

Title: S () Change (X) Addition
Name: CAGNETTA, STEVEN J
Address: 28 STONE AVENUE
City-St-Zip: WINCHESTER, MA 01890 US

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 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: STEVEN J. CAGNETTA

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04/27/2004

Electronic Signature of Signing Officer or Director

Date