

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086793

FILED
Apr 08, 2007
Secretary of State

Entity Name: ERIC BOUCHARD, M.D., P.A.

Current Principal Place of Business:

150 NE 15TH AVE
140
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

3306 SHADOWMOSS DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

150 NE 15TH AVE
140
FT. LAUDERDALE, FL 33301

New Mailing Address:

3306 SHADOWMOSS DRIVE
TALLAHASSEE, FL 32308

FEI Number: 65-1200126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUCHARD, ERIC
150 NE 15TH AVE
140
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

BOUCHARD, ERIC
3306 SHADOWMOSS DRIVE
TALLAHASSEE, FL 32308 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: ERIC BOUCHARD

04/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOUCHARD, ERIC M.D.
Address: 150 NE 15TH AVE #140
City-St-Zip: FT. LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BOUCHARD, ERIC M.D.
Address: 3306 SHADOWMOSS DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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: ERIC BOUCHARD

P

04/08/2007

Electronic Signature of Signing Officer or Director

Date