2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 08, 2006 8:00 am Secretary of State

Mailing Address 2388 MMOKALEE ROAD APPLES FL 34110 Address 2388 MMOKALEE ROAD APPLES FL 34110 Address 2388 MMOKALEE ROAD APPLES FL 34110 Address APPLES FL 34110 A	DOCUMENT # P03000097772 1. Entity Name MICHAEL R. MACDONALD, P.A.						05-08-2006	90297 034 ***15	0.00
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City & State	2. Principal Place of Business		3. Mailing Address						
Country Zip	Suite, Apt. #, etc.		Suite, Apt. #, etc.			04242006	Chg-P	CR2E034 (11/05)	
S. Certificate of Statutu Desired Fee Required T. Name and Address of New Registered Agent Name Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) Oity FL Zip Code 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 Rorida. I am familiar with, and accept the obligations of registered agent and the registered Agent agents recent when remaining) DATE SIGNATURE Squates, types or primed name of imparted agent and the replacable (InDTE Registered Agent agents recent when remaining) DATE FILE NOWILL FEE IS \$150.00 P. Election Campaign Financing Trust Fund Contribution. Addition Fees P.T ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITIE NAME NAME NAME Delete ITIE NAME	City & State		City & State		4	XXX 20-0			
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2. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vichal Rypes of PRINTED NAME OF SIGNING OFFICER OR DIRECTOR