

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033713

FILED  
May 08, 2006  
Secretary of State

Entity Name: JASON D. LEWIS, D.D.S., P.A.

**Current Principal Place of Business:**

130 GATEWAY CIRCLE  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

130 GATEWAY CIRCLE  
JACKSONVILLE, FL 32259

**New Mailing Address:**

FEI Number: 20-0734340      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

AKEL, EDWARD C  
1 INDEPENDENT DRIVE  
SUITE 2301  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LEWIS, JASON D D.D.S.  
Address: 1848 CROSS POINT WAY  
City-St-Zip: SAINT AUGUSTINE, FL 32092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DR (X) Change ( ) Addition  
Name: LEWIS, JASON D D.D.S.  
Address: 807 CYPRESS CROSSING TRAIL  
City-St-Zip: SAINT AUGUSTINE, FL 32095

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: JASON D LEWIS

PRES

05/08/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date