2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071378

Entity Name: GULF STREAM NEUROLOGY, P.A.

FILED Mar 10, 2005 Secretary of State

Current Principal Place of Business: Nev	v Principal Place of Business:
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933 CLINT MOORE RD 10151 DEERWOOD PARK BLVD BOCA RATON, FL 33487 SUITE 250, BLDG 200

JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

933 CLINT MOORE RD PO BOX 7868

BOCA RATON, FL 33487 BUFFALO GROVE, IL 60089

FEI Number: 20-1104680 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:

HINDEN, RICK
933 CLINT MOORE RD
BOCA RATON, FL 33487 US

CORPORATION SERVICE COMPANY
1501 HAYS STREET
TALLAHASSEE, FL 32301 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: TERRY FERENTINO 03/10/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ()Delete Title: ()Change ()Addition

 Name:
 ANDERSON, NILS
 Name:

 Address:
 2111 SPRUCEWOOD LN
 Address:

 City-St-Zip:
 LINDENHURST, IL 60046
 City-St-Zip:

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: NILS ANDERSON, MD PSD 03/10/2005