

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164473

FILED
Jul 06, 2005
Secretary of State

Entity Name: PRIMARY CARE OF NORTHEAST FLORIDA, P.A.

Current Principal Place of Business:

13141 EASON ISLAND COURT
JACKSONVILLE, FL 32224

New Principal Place of Business:

4466 SWILCAN BRIDGE LANE NORTH
JACKSONVILLE, FL 32224

Current Mailing Address:

13141 EASON ISLAND COURT
JACKSONVILLE, FL 32224

New Mailing Address:

4466 SWILCAN BRIDGE LANE NORTH
JACKSONVILLE, FL 32224

FEI Number: 20-1966671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHAFOOR, NASRULLAH
13141 EASON ISLAND COURT
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

GHAFOOR, NASRULLAH
4466 SWILCAN BRIDGE LANE NORTH
JACKSONVILLE, FL 32224 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: NASRULLAH GHAFOOR

07/06/2005

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: P () Delete
Name: GHAFOOR, NASRULLAH
Address: 13141 EASON ISLAND COURT
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GHAFOOR, NASRULLAH
Address: 4466 SWILCAN BRIDGE LANE NORTH
City-St-Zip: JACKSONVILLE, FL 32224

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: NASRULLAH GHAFOOR

OFF

07/06/2005

Electronic Signature of Signing Officer or Director

Date