

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 14, 2006 8:00 am**  
**Secretary of State**

06-14-2006 90006 025 \*\*\*150.00

<b>DOCUMENT # P05000044195</b> 1. Entity Name KENNETH ARTHUR WALLACE, III, M.D., P.A.																											
Principal Place of Business 3600 SHADY LANE PALM HARBOR, FG 34683		Mailing Address 3600 SHADY LANE PALM HARBOR, FG 34683																									
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																									
City & State <b>PALM HARBOR, FL</b> Zip Country		City & State <b>PALM HARBOR, FL</b> Zip Country																									
4. FEI Number <b>20-2631957</b>		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required																									
6. Name and Address of Current Registered Agent  GILMORE, RICARDO L 201 E KENNEDY BLVD SUITE 600 TAMPA, FL 33602		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 Florida. I am familiar with, and accept the obligations of registered agent.																											
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																									
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																											
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12. I hereby 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: <i>Kenneth A Wallace @ M3</i>		Date: <i>6/14/06</i> Daytime Phone #: <i>727-458-2703</i>																									