2006 FOR PROFIT CORPORATION ANNUAL REPORT

03-15-2006 90110 026 ***150.00
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06 MAR 28 9:23
SECRE... TALLAHASSEE, FLORIDA

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DOCUMENT # P05000053865

1. Entity Name
LINDA H. BURNS, LCSW, P.A.

Principal Place of Business
2999 NE 191ST STREET - SUITE 702
AVENTURA, FL 33180

Mailing Address
2999 NE 191ST STREET - SUITE 702
AVENTURA, FL 33180

2. Principal Place of Business — Suite, Apt. #, etc. / City & State / Zip / Country: same as above

3. Mailing Address — Suite, Apt. #, etc. / City & State / Zip / Country: same as above

03112006 Chg-P CR2E034 (11/05)

4. FEI Number 76-0783181 ☐ Applied For ☐ Not Applicable

5. ~~Certificate of Status Desired~~ ☐ ~~$8.75 Additional Fee Required~~

6. Name and Address of Current Registered Agent

BURNS, LINDA H
2999 NE 191ST STREET - SUITE 702
AVENTURA, FL 33180

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) N/A
City 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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE N/A

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. ~~Election Campaign Financing Trust Fund Contribution~~ ☐ ~~$5.00~~ May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D BURNS, LINDA H 2999 NE 191ST STREET - SUITE 702 AVENTURA, FL 33180 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY ST ZIP	☐ Change ☐ Addition
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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: Linda H. Burns 3/11/06 305-651-1731

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #