

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000133958

**FILED**  
**Feb 20, 2006**  
**Secretary of State**

**Entity Name:** COMFORTABLY NUMB ANESTHESIA, INC.

**Current Principal Place of Business:**

11705 SAND CASTLE LANE  
PANAMA CITY BEACH, FL 32407 US

**New Principal Place of Business:**

1044 SE 6TH CT  
DANIA BEACH, FL 33004 US

**Current Mailing Address:**

11705 SAND CASTLE LANE  
PANAMA CITY BEACH, FL 32407 US

**New Mailing Address:**

398 EAST DANIA BEACH BLVD  
#162  
DANIA BEACH, FL 33004 US

**FEI Number:** 20-3581955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SHEPARD, TYLER  
11705 SAND CASTLE LANE  
PANAMA CITY BEACH, FL 32407 US

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

SHEPARD, TYLER B  
1044 SE 6TH CT  
DANIA BEACH, FL 33004 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:** TYLER B. SHEPARD

02/20/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** SHEPARD, TYLER  
**Address:** 11705 SAND CASTLE LANE  
**City-St-Zip:** PANAMA CITY BEACH, FL 32407 US

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

**Title:** P (X) Change ( ) Addition  
**Name:** SHEPARD, TYLER B  
**Address:** 1044 SE 6TH CT  
**City-St-Zip:** DANIA BEACH, FL 33004 US

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:** TYLER B. SHEPARD

P

02/20/2006

Electronic Signature of Signing Officer or Director

Date