

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000095479

FILED
Apr 13, 2007
Secretary of State

Entity Name: WILLIAM TONY MCKENZIE, M.D., P.A.

Current Principal Place of Business:

1269 CAPRI DR
PANAMA CITY, FL 32405

New Principal Place of Business:

621 N COVE BLVD
PANAMA CITY, FL 32401

Current Mailing Address:

1269 CAPRI DR
PANAMA CITY, FL 32405

New Mailing Address:

621 N COVE BLVD
PANAMA CITY, FL 32401

FEI Number: 20-5229770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEHN, ROLAND W ESQ
220 MCKENZIE AVE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: MCKENZIE, WILLIAM T MD
Address: 621 N COVE BLVD
City-St-Zip: PANAMA CITY, FL 32401

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: WILLIAM TONY MCKENZIE

P

04/13/2007

Electronic Signature of Signing Officer or Director

Date