

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000021518

FILED
Apr 06, 2006
Secretary of State

Entity Name: PATRICE BOYES, P.A.

Current Principal Place of Business:

408 WEST UNIVERSITY AVE.
SUITE PH
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

408 WEST UNIVERSITY AVE.
SUITE PH
GAINESVILLE, FL 32601 US

New Mailing Address:

FEI Number: 59-3177149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOYES, PATRICE F ESQ.
4719 NW 53RD AVE.
SUITE C
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

BOYES, PATRICE F ESQ.
408 WEST UNIVERSITY AVE
SUITE PH
GAINESVILLE, FL 32601 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:

04/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: BOYES, PATRICE ESQ.
Address: 4719 NW 53RD AVE., SUITE C
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: BOYES, PATRICE ESQ.
Address: 408 WEST UNIVERSITY AVE SUITE PH
City-St-Zip: GAINESVILLE, FL 32601

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: PATRICE F. BOYES, ESQ.

PSTD

04/06/2006

Electronic Signature of Signing Officer or Director

Date