2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000012861

Entity Name: KEVIN CHARLES O'LOUGHLIN, M.D., P.A.

FILED Apr 16, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2100 NEBRASKA AVE 400 BEACH ROAD

SUITE 113 # 201

FORT PIERCE, FL 349504832 VERO BEACH, FL 32963

Current Mailing Address: New Mailing Address:

PO BOX 126

FT PIERCE, FL 349540126

FEI Number: 65-0483007 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

O'LOUGHLIN, KEVIN C MD

1005 TREASURE LANE

O'LOUGHLIN, KEVIN C MD

400 BEACH ROAD

VERO BEACH, FL 32963 US #201 VERO BEACH, FL 32963 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: 04/16/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. () Delete Title: DR. (X) Change () Addition

 Name:
 O'LOUGHLIN, KEVIN C
 Name:
 O'LOUGHLIN, KEVIN C

 Address:
 2100 NEBRASKA AVE, STE 113
 Address:
 400 BEACH ROAD, #201

 City-St-Zip:
 FORT PIERCE, FL 34950
 City-St-Zip:
 VERO BEACH, FL 32963

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: KEVIN O'LOUGHLIN DR. 04/16/2006