2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000072097

City-St-Zip: ORLANDO, FL

Entity Name: JAMES K. SHEA. M.D., INC.

FILED Jul 08, 2005 Secretary of State

Littly Na	ille. JAIVIES I	C. SHEA, WI.D., INC.			
Current Principal Place of Business:			New Principal Place of Business:		
300 N MIL ORLANDO	LS AVE D, FL 32803				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
300 N MIL ORLANDO	LS AVE D, FL 32803				
FEI Number	: 59-3273215	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of (Current Registered Agent:	Name and Address of	New Registered Agent:	
SHEA, JA 300 N MIL ORLANDO		US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (SHEA, JAMES 300 N MILLS A ORLANDO, FL	NE.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S (SHEA, JULIE J 300 N MILLS A		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 D. CREEL CEO 07/08/2005