

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000092253

FILED
Jul 03, 2004
Secretary of State

Entity Name: JUANITA M. BROWN, D.O., P.A.

Current Principal Place of Business:

1417 N SEMORAN BLVD
SUITE 103
ORLANDO, FL 328073555

New Principal Place of Business:

Current Mailing Address:

1301 TIERRA CIRCLE
WINTER PARK, FL 32792 US

New Mailing Address:

3748 CHULUOTA ROAD
ORLANDO, FL 32820 US

FEI Number: 59-3281080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JUANITA M
1417 N SEMORAN BLVD
SUITE 103
ORLANDO, FL 328073555 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BROWN, JUANITA M
Address: 1301 TIERRA CIRCLE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BROWN, JUANITA M
Address: 3748 CHULUOTA ROAD
City-St-Zip: ORLANDO, FL 32820

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: JUANITA M. BROWN, D.O.

PRES

07/03/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date