2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P96000034080

1. Entity Name
CHRISTOPHER D. TANNER M.D., P.A.

Principal Place of Business	Mailing Address
1000 MARWALT DR FORT WALTON BEACH, FL 32547 US	P.O. BOX 5500 DESTIN, FL 32540-6309 US

DO NOT WRITE IN THIS SPACE

04122005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-3375378	Not Applicable

5. Certificate of Status Desired   ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TANNER, CHRISTOPHER D
1000 MARWALT DR
FORT WALTON BEACH, FL 32547

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IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

U00000305594
04/14/05-80093-001 150.00

10.   OFFICERS AND DIRECTORS

TITLE	COE
NAME	TANNER, CHRISTOPHER D.
STREET ADDRESS	1000 MARWALT DR
CITY-ST-ZIP	FORT WALTON BEACH, FL 32547

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/05
Date   Daytime Phone #