

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000059460

FILED
Apr 17, 2004
Secretary of State

Entity Name: DAWN M. DAVIDSON, M.D., P.A.

Current Principal Place of Business:

290 IBIS AVE
MELBOURNE BCH, FL 32951 US

New Principal Place of Business:

460 RIGGS AVE
MELBOURNE BCH, FL 32951 US

Current Mailing Address:

290 IBIS AVE
MELBOURNE BCH, FL 32951 US

New Mailing Address:

460 RIGGS AVE
MELBOURNE BCH, FL 32951 US

FEI Number: 59-3385760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIDSON, DAWN M
290 IBIS DRIVE
MELBOURNE BEACH, FL 32951

Name and Address of New Registered Agent:

DAVIDSON, DAWN M
460 RIGGS AVE
MELBOURNE BEACH, FL 32951

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:

04/17/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DAVIDSON-JACKOVICH, DAWN
Address: 290 IBIS DRIVE
City-St-Zip: MELBOURNE BCH, FL 32951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DAVIDSON-JACKOVICH, DAWN
Address: 460 RIGGS AVE
City-St-Zip: MELBOURNE BCH, FL 32951

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: DAWN DAVIDSON-JOCKOVICH

PRES

04/17/2004

Electronic Signature of Signing Officer or Director

Date