

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104588

FILED
Feb 19, 2007
Secretary of State

Entity Name: PAUL N. GOTKIN, D.P.M. AND DAVID A. GUBERNICK, D.P.M., P.A.

Current Principal Place of Business:

2423 S.E. FEDERAL HIGHWAY
STUART, FL 34994

New Principal Place of Business:

2291 S.E. FEDERAL HIGHWAY
STUART, FL 34994

Current Mailing Address:

2423 S.E. FEDERAL HIGHWAY
STUART, FL 34994

New Mailing Address:

2291 S.E. FEDERAL HIGHWAY
STUART, FL 34994

FEI Number: 65-0713133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMON, CONRAD ESQ
COONEY, WARD, LESHER & DAMON, P.A.
1555 PALM BEACH LAKES BOULEVARD, STE. 1000
WEST PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOTKIN, PAUL N
Address: 2424 SE FEDERAL HWY
City-St-Zip: STUART, FL

Title: VP () Delete
Name: GUBERNICK, DAVID A
Address: 2423 SE FEDERAL HWY
City-St-Zip: STUART, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOTKIN, PAUL N
Address: 2291 SE FEDERAL HWY
City-St-Zip: STUART, FL

Title: VP (X) Change () Addition
Name: GUBERNICK, DAVID A
Address: 2291 SE FEDERAL HWY
City-St-Zip: STUART, FL

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: PAUL N GOTKIN

P

02/19/2007

Electronic Signature of Signing Officer or Director

Date