

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000034977

Entity Name: PHYSICIANS MEDICAL CENTER, INC.

FILED
Jan 26, 2006
Secretary of State

Current Principal Place of Business:

2970 HARTLEY RD
#106
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

2970 HARTLEY RD
#106
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3442033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKEL, DANIEL D
1 INDEPENDENT DR., STE. 2301
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

COHEN, LANCE P
1723 BLANDING BLVD.
102
JACKSONVILLE, FL 32210 US

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: /S/ LANCE PAUL COHEN

01/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHOTT, EDWARD H
Address: 2970 HARTLEY RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete
Name: SCHOTT, HELEN M
Address: 2970 HARTLEY RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CRITZER, VICTORIA
Address: 2970 HARTLEY RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: P VP (X) Change () Addition
Name: CRITZER, VICTORIA
Address: 2970 HARTLEY RD.
City-St-Zip: JACKSONVILLE, FL 32257

Title: ST () Change (X) Addition
Name: CRITZER, MICHAEL
Address: 2970 HARTLEY RD
City-St-Zip: JACKSONVILLE, FL 32257

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: /S/ VICTORIA CRITZER

P

01/26/2006

Electronic Signature of Signing Officer or Director

Date