

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P97000038843

1. Entity Name
RODERIC G. MAGIE, P.A., INC.



Principal Place of Business
25 WEST CEDAR STREET
PENSACOLA, FL 32501

Mailing Address
25 WEST CEDAR STREET
PENSACOLA, FL 32501

DO NOT WRITE IN THIS SPACE

**FILED
Apr 27, 2006 8:00 am
Secretary of State**

03-01-2006 90023 044 ***150.00

66012161



02032006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3444624	Applied For Not Applicable
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5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCABEE-SCOTT & COMPANY, CPA
801 W GARDEN STREET
PENSACOLA, FL 32501

**DO NOT WRITE
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 remailing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
MAGIE, RODERIC G
25 WEST CEDAR STREET
PENSACOLA, FL 32501

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

4/24/06 850-432-2558
Date Daytime Phone #