

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069950

Entity Name: ALLEN LIFTON, M.D., P.A.

FILED  
Apr 19, 2006  
Secretary of State

## Current Principal Place of Business:

250 S TAMiami TRAIL  
201  
VENICE, FL 34285

## New Principal Place of Business:

## Current Mailing Address:

250 S TAMiami TRAIL  
201  
VENICE, FL 34285

## New Mailing Address:

FEI Number: 65-0777737      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAM HELLER  
2200 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33020      US

## Name and Address of New Registered Agent:

JAMESON VICARS CPA  
898 PINE RIDGE LANE  
SARASOTA, FL 34240      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: JAMESON VICARS

04/19/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LIFTON, ALLEN M M.D.  
Address: 250 TAMiami TR. S.  
City-St-Zip: VENICE, FL 34285

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALLEN LIFTON MD

P

04/19/2006

Electronic Signature of Signing Officer or Director

Date