

2006 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000081078	
1. Entity Name ATLANTIC PSYCHIATRIC, P.A.	

Principal Place of Business 719 BEVILLE ROAD S. DAYTONA, FL 32119 US	Mailing Address P O BOX 290849 PT ORANGE, FL 32129 US
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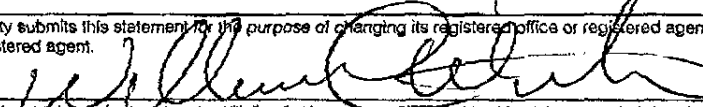
01302006 No Chg-P CR2E034 (11/05)

4. FET Number 59-3469771	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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6. Name and Address of Current Registered Agent WINTERS, WILLIAM 719 BEVILLE ROAD SOUTH DAYTONA, FL 32119
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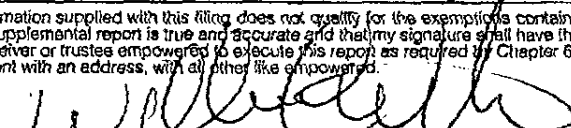
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)	4/19/06 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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WINTERS, WILLIAM C P O BOX 290849 PT ORANGE, FL 32129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WINTERS, SHARON K P O BOX 290849 PT ORANGE, FL 32129
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05/05/06 80003-019 150.00

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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	4/19/06 DATE Daytime Phone #