2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2006
Secretary of State

DOCUMENT# P98000000706

Entity Name: ANA M. JORQUERA, M.D., P.A.

Current Principal Place of Business:

9765 SAN JOSE BLVD
STE 105
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

9765 SAN JOSE BLVD
STE 105
JACKSONVILLE, FL 32257

New Mailing Address:

FEI Number: 59-3492206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JORQUERA, ANA M
9765 SAN JOSE BLVD
STE 105
JACKSONVILLE, FL 32257 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: JORQUERA, ANA M MD
Address: 7933 BAYMEADOWS WAY, STE 3
City-St-Zip: JACKSONVILLE, FL 32256

Title: T ( ) Delete
Name: MCGREADY, BEGONA
Address: 1408 GIBRALTER LANE
City-St-Zip: ORANGE PARK, FL 32003

Title: S ( ) Delete
Name: JULIAN, ANA
Address: 4331 COLONIAL AVE
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: JORQUERA, ANA M MD
Address: 2661 RIVERPORT DR. N.
City-St-Zip: JACKSONVILLE, FL 32223

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

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: ANA M. JORQUERA, MD P 03/10/2006

Electronic Signature of Signing Officer or Director — Date