2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2004
Secretary of State

DOCUMENT# P98000089642

Entity Name: ANTHONY J. CAMMACK, M.D., P.A.

Current Principal Place of Business:

8156 NAVARRE PKY
NAVARRE, FL 32566

New Principal Place of Business:

2090 FALCONHURST PLACE
NAVARRE, FL 32566

Current Mailing Address:

2393 BYERS COURT
NAVARRE, FL 32566 US

New Mailing Address:

2090 FALCONHURST PLACE
NAVARRE, FL 32566 US

FEI Number: 59-3540555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMMACK, ANTHONY J
2393 BYERS COURT
NAVARRE, FL 32566 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: CAMMACK, ANTHONY J
Address: 2393 BYERS CT.
City-St-Zip: NAVARRE, FL 32566

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 Section 119.07(3)(i), 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: ANTHONY J. CAMMACK, MD DP 05/07/2004
Electronic Signature of Signing Officer or Director Date