## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105399

Entity Name: RALPH AARON PARKS, M.D., P.A.

FILED Apr 25, 2004 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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1250 SOUTH 18TH STREET 1209 SNIDER STREET SUITE 204 MARION, VA 24354

FERNANDINA BEACH, FL 32034

Current Mailing Address: New Mailing Address:

1250 SOUTH 18TH STREET 1209 SNIDER STREET SUITE 204 MARION, VA 24354

FERNANDINA BEACH, FL 32034 MARION, VA 24354

FEI Number: 59-3547257 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

 Name:
 PARKS, RALPH A
 Name:
 PARKS, RALPH A

 Address:
 1250 SOUTH 18TH STREET
 Address:
 1209 SNIDER STREET

 City-St-Zip:
 FERNANDINA BEACH, FL 32034
 City-St-Zip:
 MARION, VA 24354

Title: SV () Delete Title: SV (X) Change () Addition

 Name:
 PARKS, NANCY J
 Name:
 PARKS, NANCY J

 Address:
 1250 SOUTH 18TH STREET
 Address:
 1209 SNIDER STREET

 City-St-Zip:
 FERNANDINA BEACH, FL 32034
 City-St-Zip:
 MARION, VA 24354

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: NANCY J PARKS SV 04/25/2004