

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000028569

FILED
Sep 02, 2004
Secretary of State

Entity Name: JOSEPH R. BARNES, M.D., P.A.

Current Principal Place of Business:

4942 HWY. 98 W., SUITE 5
SANTA ROSA BCH, FL 32459

New Principal Place of Business:

4942 HWY. 98 W., SUITE 15
SANTA ROSA BCH, FL 32459

Current Mailing Address:

P. O. BOX 2310
SANTA ROSA BCH, FL 32459

New Mailing Address:

FEI Number: 59-3567067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, JOSEPH R
4942 HWY 98 W SUITE 15
SANTA ROSA BEACH, FL 32459 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: D () Delete
Name: BARNES, JOSEPH R
Address: 90 SANDSTONE ST.
City-St-Zip: SANTA ROSA BCH, FL 32459

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: JOSEPH R. BARNES, MD

OWNE

09/02/2004

Electronic Signature of Signing Officer or Director

Date