

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000034280

Entity Name: MICHAEL K. RILEY, M.D. P.A.

FILED
Jul 06, 2005
Secretary of State

Current Principal Place of Business:

2300 SE 17TH STREET, STE. 500
OCALA, FL 34471

New Principal Place of Business:

2300 SE 17TH STREET
SUITE 500
OCALA, FL 34471 US

Current Mailing Address:

2300 SE 17TH STREET, STE. 500
OCALA, FL 34471

New Mailing Address:

2300 SE 17TH STREET
SUITE 500
OCALA, FL 34471 US

FEI Number: 59-3571310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, MICHAEL K
2300 SE 17TH STREET, STE. 500
OCALA, FL 34471 US

Name and Address of New Registered Agent:

RILEY, MICHAEL K
2300 SE 17TH STREET
SUITE 500
OCALA, FL 34471 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:

07/06/2005

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: DR () Delete
Name: RILEY, MICHAEL K
Address: 2300 SE 17TH STREET, STE. 500
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: RILEY, MICHAEL K
Address: 2300 SE 17TH STREET, SUITE 500
City-St-Zip: OCALA, FL 34471 US

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: SHERYL GULICK

MGR

07/06/2005

Electronic Signature of Signing Officer or Director

Date