2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081187

Entity Name: HEART OF FLORIDA OB-GYN ASSOCIATES, P.A.

FILED Jan 25, 2006 Secretary of State

Comment Drive in al Diago of Descinator	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business:

2221 NORTH BLVD. WEST DAVENPORT, FL 33832

Current Mailing Address: New Mailing Address:

HEART OF FL. OB/GYN. P.O. BOX 667 DAVENPORT, FL 33836

FEI Number: 59-3598026 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:

SANMARTIN, JULIO
2221 N. BLVD. WEST
DAVENPORT, FL 33837 US
SAN MARTIN, JULIO
2221 NORTH BLVD W
DAVENPORT, FL 33837 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: JULIO SAN MARTIN 01/25/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SANMARTIN, JULIO
 Name:
 SAN MARTIN, JULIO R

 Address:
 2221 NORTH BOULEVARD WEST
 Address:
 2221 NORTH BLVD W

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837

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

 Name:
 SALAMANCA, EDWIN
 Name:
 SALAMANCA, EDWIN M

 Address:
 2221 NORTH BOULEVARD WEST
 Address:
 2221 NORTH BLVD W

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837

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

 Name:
 ALKASS, MARK
 Name:
 ALKASS, MARK

 Address:
 2221 NORTH BOULEVARD WEST
 Address:
 2221 NORTH BLVD W

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837

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: MARK ALKASS S 01/25/2006