

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000092189

FILED
Apr 08, 2004
Secretary of State

Entity Name: JERRY D. LEVENTHAL, M.D., P.A.

Current Principal Place of Business:

8465 NAVARRE PKWY,STE.12
NAVARRE, FL 32566

New Principal Place of Business:

8990 ORTEGA PARK DR
NAVARRE, FL 32566

Current Mailing Address:

8465 NAVARRE PKWY,STE.12
NAVARRE, FL 32566

New Mailing Address:

PO BOX 6299
NAVARRE, FL 32566

FEI Number: 59-3605195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCHARD, R.LANE
1811 ALHAMBRA ST
NAVARRE, FL 32566

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: LEVENTHAL, JERRY D M.D.
Address: 8465 NAVARRE PKWY,STE.12
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEVENTHAL, JERRY D M.D.
Address: 8990 ORTEGA PARK DR
City-St-Zip: NAVARRE, FL 32566

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: JERRY D LEVENTHAL,M.D.,P.A.

D

04/08/2004

Electronic Signature of Signing Officer or Director

Date