2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000093769

Entity Name: ROBERT B. DEHGAN, M.D., P.A.

FILED Apr 29, 2005 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
2730 US 1 SOUTH UNIT C				
SAINT AUGUSTINE,	FL 32086			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
2730 US 1 SOUTH UNIT C SAINT AUGUSTINE,	FL 32086			
FEI Number: 59-3625299	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
MOTOLAW, INC. 50 NORTH LAURA S STE 2500 JACKSONVILLE, FL				
The above named entine the State of Florida		purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		gent	Date	
Election Campaign Finar	ncing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: DP Name: DEHGAN, F	()Delete ROBERT B M.D.	Title: Name:	() Change () Addition	

 Name:
 DEHGAN, ROBERT B M.D.
 Name:

 Address:
 327 JACKSONVILLE DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 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: ROBERT B. DEHGAN, M.D. D 04/29/2005