

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S16840

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: BARBARA A. TURKELL, D.C., P.A.

## Current Principal Place of Business:

5030 CHAMPION BLVD  
#9  
BOCA RATON, FL 33496

## New Principal Place of Business:

16047 VIA MONTEVERDE  
DELRAY BEACH, FL 33446

## Current Mailing Address:

5030 CHAMPION BLVD  
#9  
BOCA RATON, FL 33496

## New Mailing Address:

16047 VIA MONTEVERDE  
DELRAY BEACH, FL 33446

FEI Number: 65-0235406

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TURKELL, BARBARA  
5030 CHAMPION BLVD #9  
DELRAY BCH, FL 33496 US

## Name and Address of New Registered Agent:

TURKELL, BARBARA  
16047 VIA MONTEVERDE  
DELRAY BCH, FL 33446 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: BARBARA TURKELL

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TURKELL, BARBARA A.,  
Address: 5030 CHAMPION BLVD  
City-St-Zip: BOCA RATON, FL 33496

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: TURKELL, BARBARA A.,  
Address: 16047 VIA MONTEVERDE  
City-St-Zip: DELRAY BEACH, FL 33446

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: BARBARA TURKELL

DR.

04/16/2007

Electronic Signature of Signing Officer or Director

Date