


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2005 08:00 AM
Secretary of State

DOCUMENT # 673460
 1. Entity Name
 ECONFINA CARDIOLOGY GROUP, P.A.



Principal Place of Business ... Mailing Address
 801 E. 6TH STREET, STE.504 801 E. 6TH STREET, STE.504
 PANAMA CITY, FL 32401 PANAMA CITY, FL 32401

DO NOT WRITE IN THIS SPACE



01182005 No Chg-P CR2E034 (10/03)

4. FEI Number **59-2005970** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 COOK, JAMES T.
 801 EAST SIXTH STREET
 ST 504
 PANAMA CITY, FL 32401

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	COOK, JAMES T III
STREET ADDRESS	801 E 6TH ST
CITY- ST- ZIP	PANAMA CITY FL,
TITLE	VP
NAME	MANER, THOMPSON C
STREET ADDRESS	801 E 6TH ST
CITY- ST- ZIP	PANAMA CITY FL,
TITLE	T
NAME	TRANHAM, J L
STREET ADDRESS	801 E 6TH ST
CITY- ST- ZIP	PANAMA CITY, FL 32401
TITLE	VP
NAME	EVANS, BUSSIE A.
STREET ADDRESS	801 E 6TH ST
CITY- ST- ZIP	PANAMA CITY, FL
TITLE	S
NAME	STOKES, MICHAEL J.
STREET ADDRESS	801 E 6TH ST
CITY- ST- ZIP	PANAMA CITY, FL
TITLE	VP
NAME	BADDIGAM, HARI K
STREET ADDRESS	801 E. 6TH ST.
CITY- ST- ZIP	PANAMA CITY, FL 32401

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 02/05/05-80028-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **2-2-05 (850) 769-0329**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #