

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 673460

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** ECONFINA CARDIOLOGY GROUP, P.A.

**Current Principal Place of Business:**

801 E. 6TH STREET, STE.504  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

801 E. 6TH STREET, STE.504  
PANAMA CITY, FL 32401

**New Mailing Address:**

**FEI Number:** 59-2005970

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRANHAM, J L MD+  
801 EAST SIXTH STREET  
ST 504  
PANAMA CITY, FL 32401 US

**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

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: MORROW, MICHAEL F MD  
Address: 801 E 6TH ST  
City-St-Zip: PANAMA CITY, FL

Title: VP  
Name: MANER, THOMPSON C  
Address: 801 E 6TH ST  
City-St-Zip: PANAMA CITY FL,

Title: P  
Name: TRANHAM, J L  
Address: 801 E 6TH ST  
City-St-Zip: PANAMA CITY, FL 32401

Title: VP  
Name: EVANS, BUSSIE A.  
Address: 801 E 6TH ST  
City-St-Zip: PANAMA CITY, FL

Title: S  
Name: STOKES, MICHAEL J.  
Address: 801 E 6TH ST  
City-St-Zip: PANAMA CITY, FL

Title: VP  
Name: BADDIGAM, HARI K  
Address: 801 E. 6TH ST.  
City-St-Zip: PANAMA CITY, FL 32401

I hereby 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 all other like empowered.

SIGNATURE: J L TRANHAM, M.D., PRESIDENT, C.E.O.

P

02/17/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date

673460

**CARDIOLOGY ASSOCIATES, P.A.**

301 EAST SIXTH STREET, SUITE 504  
PANAMA CITY, FLORIDA 32401

TELEPHONE: (850) 769-0329

**Thompson C. Maner, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine, Cardiovascular Disease  
and Interventional Cardiology

**B. Anthony Evans, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine and Cardiovascular Disease

**Michael J. Stokes, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine, Cardiovascular Disease  
and Interventional Cardiology

**J.L. Trantham, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine, Cardiovascular Disease,  
Clinical Electrophysiology and  
Interventional Cardiology

**Hashem M. Mubarak, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine and Cardiovascular Disease

**Samir N. Patel, M.D., F.S.C.A.I., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine, Cardiovascular Disease,  
Interventional Cardiology, and Endovascular Medicine  
Board Certified Nuclear Cardiology

**Hari K. R. Baddigan, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine, Cardiovascular Disease, and  
Cardiac Electrophysiology

**Michael F. Morrow, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine and Cardiovascular Disease

**Amir R. Haghighat, M.D., F.A.C.C.**  
Diplomate American Boards of  
Internal Medicine, Cardiovascular Disease,  
Interventional Cardiology and Endovascular Medicine  
Board Certified Nuclear Cardiology

March 2, 2011

Florida Department of State  
Division of Corporations, Corporate Filings  
P.O. Box 6327  
Tallahassee, Florida 32314

2/17/11

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Entity Name: Econfina Cardiology Group, P.A.

To Whom It May Concern:

As required by the Florida Division of Corporations the annual report for Econfina Cardiology Group, P.A. was filed online February 17, 2011.

Please note the attached copy of the February 17<sup>th</sup> filing reflects only six officers which is the most an online filing can accommodate. Econfina Cardiology Group, P.A. has at this time nine officers, and at the instruction of your office I am sending this written request to add as an addendum the following three officers.

TITLE: Assistant Treasurer  
NAME: Amir R. Haghighat, M.D.

TITLE: Assistant Treasurer  
NAME: Hashem Mubarak, M.D.

TITLE: Assistant Secretary  
NAME: Samir N. Patel, M.D.

Sincerely,



J.L. Trantham, M.D.,  
Registered Agent for Econfina Cardiology Group, P.A.