

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90747 032 ***150.00

DOCUMENT # 673460



1. Entity Name
ECONFINA CARDIOLOGY GROUP, P.A.

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

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



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2005970**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**COOK, JAMES T.
801 EAST SIXTH STREET
ST 504
PANAMA CITY FL 32401**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	COOK, JAMES T III	801 E 6TH ST	PANAMA CITY FL	<input type="checkbox"/>	<input type="checkbox"/>
VP	MANER, THOMPSON C	801 E 6TH ST	PANAMA CITY FL	<input type="checkbox"/>	<input type="checkbox"/>
T	TRANHAM, J L	801 E 6TH ST	PANAMA CITY FL 32401	<input type="checkbox"/>	<input type="checkbox"/>
VP	EVANS, BUSSIE A.	801 E 6TH ST	PANAMA CITY FL	<input type="checkbox"/>	<input type="checkbox"/>
S	STOKES, MICHAEL J.	801 E 6TH ST	PANAMA CITY FL	<input type="checkbox"/>	<input type="checkbox"/>
VP	Baddigam, Hari K.	801 E 6th St	Panama City, FL 32401	<input type="checkbox"/>	<input checked="" type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **3-5-03** (850) 769-0329 Daytime Phone #

CR2E034 (10/02)