


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000059340
1. Entity Name
GREGORY S. HAGOPIAN, P.A.



Principal Place of Business _____ Mailing Address _____
1101 6TH AVENUE WEST _____ 1101 6TH AVENUE WEST
STE 204 _____ STE 204
BRADENTON, FL 34205 _____ BRADENTON, FL 34205

DO NOT WRITE IN THIS SPACE



01102005 No Chg-P CR2E034 (10/03)

4. FEI Number **04-3674576** Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HAGOPIAN, GRGEORY S
1101 6TH AVENUE WEST
STE 204
BRADENTON, FL 34205

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IN THIS SPACE**

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.

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HAGOPIAN, GREGORY S
STREET ADDRESS	1101 6TH AVENUE WEST STE 204
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/12/05-80040-013 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Gregory S. Hagopian 1-10-05 941-747-6630
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #