

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063209

Entity Name: SCOTT GRAHAM, M.D., P.A.

FILED  
Mar 24, 2006  
Secretary of State

## Current Principal Place of Business:

1015 7TH AVE NORTH  
ST PETERSBURG, FL 33705

## New Principal Place of Business:

## Current Mailing Address:

1015 7TH AVE NORTH  
ST PETERSBURG, FL 33705

## New Mailing Address:

FEI Number: 20-1006055

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAHAM, SCOTT  
1015 7TH AVE NORTH  
ST PETERSBURG, FL 33705 US

## Name and Address of New Registered Agent:

GRAHAM, SCOTT F  
1015 7TH AVE NORTH  
ST PETERSBURG, FL 33705 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: SCOTT F GRAHAM

03/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GRAHAM, SCOTT MD  
Address: 1015 7TH AVE NORTH  
City-St-Zip: ST PETERSBURG, FL 33705

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SCOTT F GRAHAM

P

03/24/2006

Electronic Signature of Signing Officer or Director

Date