


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 28, 2007 08:00 AM
Secretary of State

DOCUMENT # P98000108425
 1. Entity Name
 MICHAEL A. FEIERTAG, M.D., P.A.



Principal Place of Business 5741 BEE RIDGE RD STE 370 SARASOTA, FL 34233	Mailing Address 5741 BEE RIDGE RD STE 370 SARASOTA, FL 34233
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DO NOT WRITE IN THIS SPACE



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0885134	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SILBERSTEIN, DAVID M
 720 SOUTH ORANGE AVE.
 SARASOTA, FL 34236

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD FEIERTAG, MICHAEL A 3741 BEE RIDGE RD #370 SARASOTA, FL 34233
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Michael A Feiertag MD 2/23/07 941-365-0655
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #