

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90230 012 ***150.00

DOCUMENT # 601840

1. Entity Name
HENRY P. TRAWICK, P.A.



Principal Place of Business
**2033 WOOD ST
218
SARASOTA, FL 34237 US**

Mailing Address
**P.O. BOX 4009
SARASOTA, FL 34230 US**

60001839



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1116351

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**TRAWICK, HENRY P.JR.
2033 WOOD ST
218
SARASOTA, FL 34237**

**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE PT
NAME TRAWICK HENRY P JR
STREET ADDRESS 2033 WOOD STREET, SUITE 218
CITY-ST-ZIP SARASOTA, FL

TITLE S
NAME BIFANO, JULIE A
STREET ADDRESS 2033 WOOD ST STE 218
CITY-ST-ZIP SARASOTA, FL 34237

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:
HENRY P. TRAWICK, JR., AS PRESIDENT

1-13-06 (941) 366-0660

Date Daytime Phone #

ATTACHMENT

60001839
601840

HENRY P. TRAWICK, P.A.
P.O. Box 4009
Sarasota, Florida 34230
941 366-0660

DOCUMENTS TRANSMITTAL:

DATE: January 13, 2006

Re: Henry P. Trawick, P.A.

The following are enclosed:

2006 Annual Report.
Check for \$150.00 for filing fee.

Division of Corporations
Annual Report Section
P.O. Box 1500
Tallahassee, Florida 32302-1500

HPT/jab