2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006
Secretary of State

DOCUMENT# F44347

Entity Name: CHARLOTTE NEPHROLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

3300 TAMIAMI TRAIL
SUITE 101 A
PT CHARLOTTE, FL 33952 US

New Principal Place of Business:

Current Mailing Address:

3300 TAMIAMI TRAIL
SUITE 101 A
PT CHARLOTTE, FL 33952 US

New Mailing Address:

FEI Number: 59-2122578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HACKETT, JACK
115 W OLYMPIA AVE
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: RAJARAM, RAMACHANDRA, N
Address: 824 DOBELL TERR
City-St-Zip: PT CHARLOTTE, FL 33952

Title: PST ( ) Delete
Name: RAJARAM, RAMACHANDRA, N
Address: 824 DOBELL TERR
City-St-Zip: PT CHARLOTTE, FL 33952

Title: VP ( ) Delete
Name: THATTE, LALITA
Address: 214 FRY TERR
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition
Name: THATTE, LALITA
Address: 104 GRAHAM
City-St-Zip: PORT CHARLOTTE, FL 33952

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: LALITA THATTE VP 03/09/2006

Electronic Signature of Signing Officer or Director Date