

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # H27686 1. Entity Name PATRICK R. CUNNINGHAM, P.A.					
Principal Place of Business 3008 MANATEE AVE W BRADENTON FL 34205			Mailing Address 3008 MANATEE AVE W BRADENTON FL 34205		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-2463103	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CUNNINGHAM, PATRICK R. 3008 MANATEE AVE W BRADENTON FL 34205				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				1st MOORE CR2E034 (10/05)	
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 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP PVS CUNNINGHAM, PATRICK R. 3101 - 21ST AVE., W. BRADENTON FL				TITLE NAME STREET ADDRESS CITY-ST-ZIP U00000502816 04/26/06-80005-014 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD CUNNINGHAM, PATRICK R. 3101 - 21ST AVE., W. BRADENTON FL				TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 the empowered.					
SIGNATURE: 				Date: April 7, 06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone: 941-747-6433	