2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P00000039737

Entity Name: CRAIG SIEGEL, P.A.

Current Principal Place of Business:

5700 MIDNIGHT PASS RD
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

5700 MIDNIGHT PASS RD
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 65-1009591 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANSKY, GLEN R ESQ
137 S. PARSONS
BRANDON, FL 33511 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SIEGEL, CRAIG P.A.
Address: 5700 MIDNIGHT PASS RD
City-St-Zip: SARASOTA, FL 34242

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SIEGEL, CRAIG OWNER
Address: 5700 MIDNIGHT PASS RD
City-St-Zip: SARASOTA, FL 34242

Title: DR ( ) Change (X) Addition
Name: BERMAN, JONATHAN A OWNER
Address: 5700 MIDNIGHT PASS RD
City-St-Zip: SARAOSTA, FL 34242

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: CRAIG SIEGEL DR 05/01/2006

Electronic Signature of Signing Officer or Director Date