

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029102

Entity Name: ROBERT A. CRAIG, P.A.

FILED
Feb 21, 2006
Secretary of State

Current Principal Place of Business:

P.O.BOX 2001
PONTE VEDRA BCH, FL 320042001

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 2001
PONTE VEDRA BCH, FL 320042001

New Mailing Address:

FEI Number: 59-3705549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, D. MICHAEL
2570 ATLANTIC BLVD
JACKSONVILLE, FL 32207 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: PTSD () Delete
Name: CRAIG, ROBERT A
Address: P.O.BOX 2001
City-St-Zip: PONTE VEDRA BCH, FL 320042001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTSD (X) Change () Addition
Name: CRAIG, ROBERT A
Address: P.O.BOX 2001
City-St-Zip: PONTE VEDRA BCH, FL 320042001 US

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: ROBERT A CRAIG

PTSD

02/21/2006

Electronic Signature of Signing Officer or Director

Date