2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000014789

1. Entity Name
ART & BARBARA KRIEGER, P.A.

Principal Place of Business	Mailing Address
7625 58TH CT. VERO BCH, FL 32967	7625 58TH CT. VERO BCH, FL 32967

DO NOT WRITE IN THIS SPACE

04242006   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
65-1173952		Not Applicable
5. Certificate of Status Desired	☐	$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KRIEGER, ARTHUR
7625 58TH CT.
VERO BCH, FL 32967

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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	KRIEGER, ARTHUR PT
STREET ADDRESS	7625 58TH CT
CITY-ST-ZIP	VERO BEACH, FL 32967
TITLE	VPS
NAME	KRIEGER, BARBARA VPS
STREET ADDRESS	7625 58TH CT
CITY-ST-ZIP	VERO BEACH, FL 32967
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/10/06--80114--021 150.00

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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: _Barbara Brian V Prasdant_　4/26/06
　　　　SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR　　Date　　Daytime Phone #

772-569-6927