


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 09, 2006 8:00 am**  
**Secretary of State**

01-09-2006 90034 007 \*\*\*150.00

<b>DOCUMENT # P05000059008</b>																																																																																																																																																											
<b>1. Entity Name</b> MICHAEL L. MORGAN, P.A.																																																																																																																																																											
<b>Principal Place of Business</b> 2364 FRUITVILLE RD SARASOTA, FL 34237			<b>Mailing Address</b> 2364 FRUITVILLE RD SARASOTA, FL 34237																																																																																																																																																								
<b>2. Principal Place of Business</b> 2364 Fruitville Road Suite, Apt. #, etc.		<b>3. Mailing Address</b> 2364 Fruitville Road Suite, Apt. #, etc.																																																																																																																																																									
<b>City &amp; State</b> Sarasota, FL 34237		<b>City &amp; State</b> Sarasota, FL 34237		<b>4. FEI Number</b> 20-2716471																																																																																																																																																							
<b>Zip</b> Country		<b>Zip</b> Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																																																																																																																																																							
<b>6. Name and Address of Current Registered Agent</b>  MORGAN, MICHAEL L 2772 GREENDALE DRIVE SARASOTA, FL 34242-3702			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> Zip Code																																																																																																																																																								
<b>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.</b>																																																																																																																																																											
<b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating) <span style="float: right;">DATE</span>																																																																																																																																																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																																																																																																																																																									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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<b>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.</b>																																																																																																																																																											
<b>SIGNATURE: By:</b> <u>Michael L. Morgan, P. A.</u> <span style="float: right;">/ - 4 - 2006 (941) 953-4555</span>																																																																																																																																																											
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <span style="float: right;">Date Daytime Phone #</span>																																																																																																																																																											