## 2006 FOR PROFIT CORPORATION

## **ANNUAL REPORT** DOCUMENT # P95000095180 1. Entity Name ERICK A. GRANA, M.D., P.A. Principal Place of Business Mailing Address 5703 JULES VERNE COURT TAMPA, FL 33611 8011 N. HIMES AVE

TAMPA, FL 33614

**FILED** Jan 27, 2006 08:00 AN Secretary of State

CR2E034 (11/05)

Fee Required



No Chg-P

01232006

## DO NOT WRITE IN THIS SPACE

5.	Certificate of Status Desired	M	\$8.75 Additional	
	59-3349030			Not Applicat
4.	FEI Number			Applied For

6. Name and Address of Current Registered Agent								
GRANA, ERICK A M.D. 5103 JULES VERNE COURT TAMPA, FL 33611			DO NOT WRITE IN THIS SPACE					
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								
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	<ol> <li>Election Campaign Finar Trust Fund Contribution.</li> </ol>	cing	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	TORS		··· -				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANA, ERICK A M.D. 5103 JULES VERNE COURT TAMPA, FL 33611			· · <u>-</u>	U00000485011 02/07/06-80023-023 158.75			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
Indiantad	l on this roport or econolomantal roport is true a	and accurate and that my signa if to execute this report as requi	iura chall ha	ve the same legal effec	9. Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if			

ERICK A. GRANA - Paridu 1/23/06

SIGNATURE: