

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000106498

**FILED**  
**Jan 23, 2006**  
**Secretary of State**

**Entity Name:** J. MICHAEL HARRIS, M.D., P.A.

**Current Principal Place of Business:**

1931 S. TUTTLE AVE  
SARASOTA, FL 34239

**New Principal Place of Business:**

2750 BAHIA VISTA STREET  
SUITE 270  
SARASOTA, FL 34239

**Current Mailing Address:**

1931 S. TUTTLE AVE  
SARASOTA, FL 34239

**New Mailing Address:**

3953 SPYGLASS HILL ROAD  
SARASOTA, FL 34238

**FEI Number:** 65-0795738

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARRIS, J. MICHAEL M.D.  
1931 S. TUTTLE AVE  
1830 S. OSPREY AVENUE  
SARASOTA, FL 34239 US

**Name and Address of New Registered Agent:**

HARRIS, J. MICHAEL M.D.  
2750 BAHIA VISTA STREET  
SUITE 270  
SARASOTA, FL 34239 US

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:** J. MICHAEL HARRIS, MD

01/23/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D ( ) Delete  
**Name:** HARRIS, J. MICHAEL M.D.  
**Address:** 1931 S. TUTTLE AVE  
**City-St-Zip:** SARASOTA, FL 342393615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** D (X) Change ( ) Addition  
**Name:** HARRIS, TRACI RN  
**Address:** 2750 BAHIA VISTA STREET  
**City-St-Zip:** SARASOTA, FL 34239

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:** TRACI HARRIS

D

01/23/2006

Electronic Signature of Signing Officer or Director

Date