

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000108178

FILED
Jul 02, 2006
Secretary of State

Entity Name: AMERICAN NEPHROLOGY ASSOCIATES, P.A.

Current Principal Place of Business:

7300 SANDLAKE COMMONS BLVD.
SUITE#321-A
ORLANDO, FL 32819

New Principal Place of Business:

9430 TURKEYLAKE ROAD
SUITE#214
ORLANDO, FL 32819

Current Mailing Address:

P. O. BOX 692036
ORLANDO, FL 328692036 US

New Mailing Address:

FEI Number: 59-3611460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAFAR, MAHMOOD
10051 HONEYTREE CT
ORLANDO, FL 32836 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JAFAR, MAHMOOD
Address: 10051 HONEYTREE CT
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAFAR MAHMOOD

D

07/02/2006

Electronic Signature of Signing Officer or Director

Date