2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2006
Secretary of State

DOCUMENT# F92290

Entity Name: EDWARD J. SARRINE, D.D.S., P.A.

Current Principal Place of Business:	**New Principal Place of Business:**
10320 56 STREET TEMPLE TERRACE, FL 33617	10320 N. 56 STREET SUITE 310 TEMPLE TERRACE, FL 33617

Current Mailing Address:	**New Mailing Address:**
10320 56 STREET TEMPLE TERRACE, FL 33617	10320 N. 56 STREET SUITE 310 TEMPLE TERRACE, FL 33617

FEI Number: 59-2205239 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
SARRIN, EDWARD J. 10320 56TH STREET TEMPLE TERRACE, FL 33617 US	SARRINE,EDWARD J. 10320 N. 56TH STREET SUITE 310 TEMPLE TERRACE, FL 33617 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: EDWARD J. SARRINE 03/01/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:		**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**	
Title:	DP ( ) Delete	Title:	DP (X) Change ( ) Addition
Name:	SARRINE, EDWARD J.,	Name:	SARRINE, EDWARD J.,
Address:	10320 56TH STREET	Address:	10320 N. 56TH STREET
City-St-Zip:	TEMPLE TERRACE FL,	City-St-Zip:	TEMPLE TERRACE, FL 33617
Title:	DS ( ) Delete	Title:	DS (X) Change ( ) Addition
Name:	SARRINE, SUSAN J	Name:	SARRINE, SUSAN J
Address:	10320 N. 56TH STREET	Address:	10320 N. 56TH STREET
City-St-Zip:	TAMPA, FL 33617	City-St-Zip:	TEMPLE TERRACE, FL 33617

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: EDWARD J. SARRINE DP 03/01/2006

Electronic Signature of Signing Officer or Director Date