

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120858

FILED  
Aug 27, 2005  
Secretary of State

Entity Name: CYPRESS POINT FAMILY DENTISTRY, P.A.

**Current Principal Place of Business:**

7990 BAYMEADOWS ROAD EAST  
#208  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

8130 BAYMEADOWS CIR. W  
103  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

7990 BAYMEADOWS ROAD EAST  
#208  
JACKSONVILLE, FL 32256

**New Mailing Address:**

8130 BAYMEADOWS CIR W.  
103  
JACKSONVILLE, FL 32256

FEI Number: 20-1522709

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARQUINEZ, ROMUALDO C JR  
6320 ST. AUGUSTINE ROAD  
BUILDING 12  
JACKSONVILLE, FL 32217 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: P ( ) Delete  
Name: RIOS, FRANKLIN M  
Address: 7990 BAYMEADOWS ROAD EAST, #208  
City-St-Zip: JACKSONVILLE, FL 32256 US

**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 Section 119.07(3)(i), 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: FRANKLIN M. RIOS

P

08/27/2005

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date