


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2006 08:00 AM
Secretary of State

DOCUMENT # 464522 1. Entity Name W. GERALD HARRIS, D.D.S., P.A.		
Principal Place of Business 328 MAGNOLIA OFFICE PLAZA TALLAHASSEE, FL 32301-2926		Mailing Address 328 MAGNOLIA OFFICE PLAZA TALLAHASSEE, FL 32301-2926
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent HARRIS, GERALD W. 328 MAGNOLIA OFFICE PLAZA TALLAHASSEE, FL 32301		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		U00000533446 05/06/06-80125-008 150.00
TITLE	PD	DO NOT WRITE IN THIS SPACE
NAME	HARRIS, W. GERALD	
STREET ADDRESS	2803 REBECCA DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL	
TITLE	S	
NAME	HARRIS, W GERALD	
STREET ADDRESS	2803 REBECCA DRIVE	
CITY-ST-ZIP	TALLAHASSEE, FL	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>W. Gerald Harris</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4 6-06 850-877-1106 <small>Date Daytime Phone #</small>

Wester Gerald Harris