2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004
Secretary of State

DOCUMENT# 498742

Entity Name: CHARLES L. PRIZZIA, D.D.S., P.A.

Current Principal Place of Business:

3940 SAN JOSE PARK DR
JACKSONVILLE, FL 32217

New Principal Place of Business:

3940 SAN JOSE PARK DR
JACKSONVILLE, FL 32217 US

Current Mailing Address:

3940 SAN JOSE PARK DR
JACKSONVILLE, FL 32217

New Mailing Address:

3940 SAN JOSE PARK DR
JACKSONVILLE, FL 32217 US

FEI Number: 59-1668956 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRIZZM, CHARLES DDS
3940 SAN JOSE PARK DRIVE
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

PRIZZA, CHARLES L DDS
3940 SAN JOSE PARK DRIVE
JACKSONVILLE, FL 32217 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: CHARLES L. PRIZZIA, D.D.S. 01/08/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PRIZZIA, CHARLES
Address: 3940 SAN JOSE PARK DR.
City-St-Zip: JACKSONVILLE FL,

Title: SD ( ) Delete
Name: PRIZZIA, CHARLES L.,
Address: 3940 SAN JOSE PARK DR.
City-St-Zip: JACKSONVILLE FL,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PRIZZIA, CHARLES L D.D.S.
Address: 3940 SAN JOSE PARK DR.
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: SD (X) Change ( ) Addition
Name: PRIZZIA, CHARLES L.,
Address: 3940 SAN JOSE PARK DR.
City-St-Zip: JACKSONVILLE, FL 32217 US

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: CHARLES L. PRIZZIA, D.D.S. P 01/08/2004
Electronic Signature of Signing Officer or Director Date