

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 499124

FILED
Jan 18, 2005
Secretary of State

Entity Name: THOMAS H. CARTLEDGE III, D.D.S., M.S., P.A.

Current Principal Place of Business:

106 NORTH OLD KINGS RD
SUITE C
ORMOND BCH, FL 321749427

New Principal Place of Business:

Current Mailing Address:

106 NORTH OLD KINGS RD
SUITE C
ORMOND BCH, FL 321749427

New Mailing Address:

FEI Number: 59-1298436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTLEDGE, THOMAS H III
106 N OLD KINGS RD
SUITE C
ORMOND BCH, FL 321749427 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CARTLEDGE, THOMAS H III
Address: 106 N OLD KINGS RD #C
City-St-Zip: ORMOND BCH, FL 32174

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: THOMAS H.CARTLEDGE

DR.

01/18/2005

Electronic Signature of Signing Officer or Director

Date