
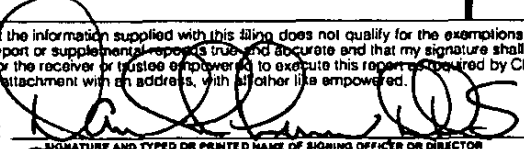


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90063 043 ***150.00

DOCUMENT # 550743 1. Entity Name DAVID L. LEEVER, D.D.S., P.A.			
Principal Place of Business 9806 N 56TH STREET TEMPLE TERRACE, FL 33617		Mailing Address 9806 N 56TH STREET TEMPLE TERRACE, FL 33617	
DO NOT WRITE IN THIS SPACE			
5. Name and Address of Current Registered Agent LEEVER, DAVID L 9806 N 56TH STREET TEMPLE TERRACE, FL 33617		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, 2008 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			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		DO NOT WRITE IN THIS SPACE	
PSTD LEEVER, DAVID L, DDS 9806 N. 56TH STREET TEMPEL TERR, FL 33617			
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TITLE NAME STREET ADDRESS CITY-STATE-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 reports 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:  _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> David L. Leever		10 May 08 (813) 988-9136 _____ <small>Date Officer/Phone #</small>	