## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 561505** 

MIAMI, FL 33176

Entity Name: ERIC J. LEBOWITZ, D.D.S., P.A.

FILED Feb 11, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

9000 S.W. 87TH COURT 1099 ANCHOR AVENUE

SUITE 120 THE VILLAGES, FL 32162 US MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

9000 S.W. 87TH COURT 1099 ANCHOR AVENUE THE VILLAGES, FL 32162 US

FEI Number: 59-1806133 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LEBOWITZ, ERIC J.
9000 S.W. 87TH COURT
SUITE 120
MIAMI, FL 33176 US

LEBOWITZ, ERIC J.
1099 ANCHOR AVENUE
THE VILLAGES, FL 32162 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: ERIC J. LEBOWITZ, DDS, PA 02/11/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 LEBOWITZ, ERIC J.,
 Name:
 LEBOWITZ, ERIC J.,

 Address:
 9000 S.W. 87TH COURT, SUITE 120
 Address:
 1099 ANCHOR AVENUE

 City-St-Zip:
 MIAMI, FL 33176 US
 City-St-Zip:
 THE VILLAGES, FL 32162 US

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 LEBOWITZ, ERIC J.,
 Name:
 LEBOWITZ, ERIC J.,

 Address:
 9000 S.W. 87TH COURT, SUITE 120
 Address:
 1099 ANCHOR AVENUE

 City-St-Zip:
 MIAMI, FL 33176 US
 City-St-Zip:
 THE VILLAGES, FL 32162 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ERIC J. LEBOWITZ, DDS, PA PD 02/11/2009