

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 581573

FILED
Apr 13, 2002 8:00 AM
Secretary of State

Entity Name: V. KEITH RILEY, D.D.S., P.A.

Current Principal Place of Business:

671 GOODLETTE RD. N
SUITE 200
NAPLES, FL 34102

New Principal Place of Business:

671 GOODLETTE RD. N
SUITE 200
NAPLES, FL 34102 US

Current Mailing Address:

671 GOODLETTE RD. N
SUITE 200
NAPLES, FL 34102

New Mailing Address:

671 GOODLETTE RD. N
SUITE 200
NAPLES, FL 34102 US

FEI Number: 59-1856084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, V. KEITH
671 GOODLETTE RD. N
SUITE 200
NAPLES, FL 34102 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RILEY, V KEITH,
Address: 330 HAWSER LANE
City-St-Zip: NAPLES, FL 00000,

Title: D () Delete
Name: ELKINS, JAMES W,
Address: 666 WEDGE DRIVE
City-St-Zip: NAPLES, FL 00000,

Title: D () Delete
Name: RILEY, STEPHANIE A,
Address: 330 HAWSER LANE
City-St-Zip: NAPLES, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RILEY, V KEITH,
Address: 330 HAWSER LANE
City-St-Zip: NAPLES, FL 34102 US

Title: D (X) Change () Addition
Name: ELKINS, JAMES W,
Address: 666 WEDGE DRIVE
City-St-Zip: NAPLES, FL 34102 US

Title: D (X) Change () Addition
Name: RILEY, STEPHANIE A,
Address: 330 HAWSER LANE
City-St-Zip: NAPLES, FL 34102 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: V. KEITH RILEY

PD

04/13/2002

Electronic Signature of Signing Officer or Director

Date