## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 581573** 

Address:

City-St-Zip:

330 HAWSER LANE

NAPLES, FL 34102 US

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

FILED Mar 11, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	LETTE RD. N				
SUITE 200 NAPLES, F		IS			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	LETTE RD. N				
SUITE 200 NAPLES, F		IS			
FEI Number:	59-1856084	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 200 NAPLES, F The above in the State	LETTE RD. N L 34102 US named entity of Florida.		ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: Electronic Signature of Registered Agent			ent	Date	
		g Trust Fund Contribution().		S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( RILEY, V KEITI 330 HAWSER   NAPLES, FL 3	ANE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) ELKINS, JAME 666 WEDGE D NAPLES, FL 3	RIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( ) RILEY, STEPH	) Delete ANIE A,	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: V. KEITH RILEY PD 03/11/2003