

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 14 AM 10:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 601053 (2)

1. Corporation Name

EHLERS, FETTY AND RIPPERSBACH, D.D.S., P.A.

Fetty, Rippersbach and Mann, D.D.S. P.A.

Principal Place of Business

Mailing Address

1515 S OSPREY AVE
SARASOTA FL 34239

1515 S OSPREY AVE
SARASOTA FL 34239

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

06/02/1969

3a. Date of Last Report

01/31/1994

4. FEI Number

59-1265362

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

EHLERS, RICHARD W
1515 S OSPREY AVE
SARASOTA FL 33579

10. Name and Address of New Registered Agent

81 Name

Michael R. Fetty

82 Street Address (P.O. Box Number is Not Acceptable)

1515 S. OSPREY AVE.

83

84 City

SARASOTA

FL

85 Zip Code

34239

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Michael R. Fetty
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4-11-95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	EHLERS, RICHARD W.
STREET ADDRESS	1515 S. OSPREY AVE.
CITY - ST - ZIP	SARASOTA FL
TITLE	S
NAME	FETTY, MICHAEL R.
STREET ADDRESS	1515 S. OSPREY AVE.
CITY - ST - ZIP	SARASOTA FL
TITLE	T
NAME	RIPPERSBACH, WILLIAM
STREET ADDRESS	1515 S. OSPREY AVE.
CITY - ST - ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Richard W. Ehlers
1.3 STREET ADDRESS	- Delete -
1.4 CITY - ST - ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	Michael R. Fetty
2.3 STREET ADDRESS	1515 S. Osprey Ave
2.4 CITY - ST - ZIP	SARASOTA, FL. 34239
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	William H. Rippersbach
3.3 STREET ADDRESS	1515 S. Osprey Ave.
3.4 CITY - ST - ZIP	SARASOTA, FL. 34239
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	Sheldon R. Mann
4.3 STREET ADDRESS	1515 S. Osprey Ave.
4.4 CITY - ST - ZIP	SARASOTA, FL 34239
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael R. Fetty
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-95

(617) 366-2233

Title

Daytime Phone #