

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 638426

FILED
Feb 17, 2008
Secretary of State

Entity Name: THOMAS F. KAINEG, D.D.S., P.A.

Current Principal Place of Business:

6700 CROSSWINDS DRIVE NORTH
SUITE 300-B
ST. PETERSBURG, FL 33710 US

New Principal Place of Business:

Current Mailing Address:

6700 CROSSWINDS DRIVE NORTH
SUITE 300-B
ST. PETERSBURG, FL 33710 US

New Mailing Address:

13030 POINSETTIA AVE
SEMINOLE, FL 33776 US

FEI Number: 59-1941356

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAINEG, THOMAS F.
6700 CROSSWINDS DRIVE
STE 300-B
ST. PETERSBURG, FL 33710 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAINEG, THOMAS F.,
Address: 13030 POINSETTIA AVE
City-St-Zip: SEMINOLE, FL 33776 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS F KAINEG

OWNE

02/17/2008

Electronic Signature of Signing Officer or Director

Date