2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #644563

1. Entity Name JON S. WILKINS D.D.S., P.A.



FILED Apr 21, 2006 08:00 AM Secretary of State

Principal Place of Business

731 WEST MORSE BOULEVARD WINTER PARK, FL 32789 US Mailing Address

731 WEST MORSE BOULEVARD WINTER PARK, FL 32789



DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desir	ed 🗌	\$8.75 Additional
4. FEI Number 59-1945874		Applied For Nat Applica
02162006 No Chg-P	CRZEC	034 (11/05)

Fee Required

6. Name and Address of Current Registered Agent

WILKINS, JON S. 731 WEST MORSE BOULEVARD WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

8. The above the obligati	named entity submits this statement for the pons of registered agent.	urpose of changing its registered office or r	egistered agent, or be	oth, in the State of Florida I am familiar with, and acce	
SIGNATURE_	Signature, typed or printed name of registered agent and title I	applicable, (NOTE, Registered Agent signature	required when reinstitting	CATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00000523965 05/03/06-80032-024 1 50.0 0	
10.	OFFICERS AND DIREC	TORS		1 85/83/86-88832-851 120-70	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILKINS, JON S 731 WEST MORSE BOULEVARD WINTER PARK, FL 00000, 32789				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
INTLE NAME STREET ADDRESS CRY-ST-ZIP			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CHY-SI-ZIP					
			/ <u></u>	and the contract of the contra	

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 is changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Your & L. J. Win

April 18, 2006 (407) 644-0177