

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 686380

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** PETER B. CLAUSSEN, D.D.S., P.A.

**Current Principal Place of Business:**

2636 JENKS AVENUE  
PANAMA CITY, FL 32405

**New Principal Place of Business:**

2636 JENKS AVENUE  
PANAMA CITY, FL 32405 US

**Current Mailing Address:**

2636 JENKS AVENUE  
PANAMA CITY, FL 32405

**New Mailing Address:**

2636 JENKS AVENUE  
PANAMA CITY, FL 32405 US

**FEI Number:** 59-2021641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CLAUSSEN, PETER B DDS  
2636 JENKS AVENUE  
PANAMA CITY, FL 32405 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: PVD  
Name: CLAUSSEN, PETER B  
Address: 2636 JENKS AVENUE  
City-St-Zip: PANAMA CITY, FL 32405 US

Title: ST  
Name: CLAUSSEN, PETER B  
Address: 2636 JENKS AVENUE  
City-St-Zip: PANAMA CITY, FL 32405 US

I hereby 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 all other like empowered.

**SIGNATURE:** PETER B. CLAUSSEN D.D.S.

PVD

01/11/2010

Electronic Signature of Signing Officer or Director

Date