## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **ANNUAL REPORT DOCUMENT # 689364** FILED 1. Entity Name DOUGLAS W. HIGHTOWER D.D.S., P.A. Jul 18, 2008 08:00 AM **Secretary of State** Principal Place of Business Mailing Address **5075 CARPENTER CREEK DRIVE** POST OFFICE BOX 12646 PENSACOLA, FL 32503 US PENSACOLA, FL 32574 07142008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2004466 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HIGHTOWER, DOUGLAS W DR. DO NOT WRITE 5075 CARPENTER CREEK DRIVE PENSACOLA, FL 32503 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Floriday Lam familiar with, and accept the obligations of registered agent. n7/18/08-80005-009 150.00 SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 10. OFFICERS AND DIRECTORS TITLE DOUGLAS W. HIGHTOWER, D.D.S., P.A. NAME 5075 CARPENTER CREEK DR. STREET ADDRESS CITY-ST-ZIP PENSACOLA., FL 32503 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY ST-ZIF TITLE NAME HER SHOWER IN BOLD STREET ADDRESS

12. 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 if changed, or on an attachment with an address, with all other-like empowered.

SIGNATURE:

CITY-ST-ZIP

GUID ATT REAL OFFICERS

WINDUL 07/15/08