

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 693758

FILED
Apr 17, 2009
Secretary of State

Entity Name: KLEIN AND BEGNOCHE DENTAL, P.A.

Current Principal Place of Business:

200 KNUTH RD.
SUITE 140
BOYNTON BEACH, FL 334361636

New Principal Place of Business:

Current Mailing Address:

200 KNUTH RD.
SUITE 140
BOYNTON BEACH, FL 334361636

New Mailing Address:

FEI Number: 59-2109133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, PAUL E
200 KNUTH RD.
SUITE 140
BOYNTON BEACH, FL 334361636 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: PS () Delete
Name: KLEIN, PAUL E DDS
Address: 200 KNUTH RD.,STE.140
City-St-Zip: BOYNTON BEACH, FL 33436

Title: T () Delete
Name: KLEIN, PAUL E.DDS
Address: 200 KNUTH RD.,STE.140
City-St-Zip: BOYNTON BEACH, FL 33436

Title: V () Delete
Name: BEGNOCHE, KENNETH R DMD
Address: 200 KNUTH RD, SUITE 140
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PAUL E KLEIN

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date