2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F41947

NAPLES, FL

City-St-Zip:

Entity Name: R. DOUGLAS ROGERS D.D.S., P.A.

FILED Mar 25, 2009 Secretary of State

| Current P | rincipal Place | of Business: | New Principal Place | New Principal Place of Business: | |
|-------------------------|--|--------------------------------|---|--|--|
| 2335 TAM | IAMI TRAIL | | | | |
| SUITE 507 | | | | | |
| NAPLES, F | FL 33940 L | JS | | | |
| Current M | lailing Addres | ss: | New Mailing Address | New Mailing Address: | |
| | .E. WESTMAN ST. N. SUITE: FL 34103 L | | | | |
| FEI Number: | : 59-2153379 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | Address of C | Current Registered Agent: | Name and Address of New Registered Agent: | | |
| 2335 9TH SUITE 507 | DOUGLAS R STREET, NOF FL 34103 US | RTH | | | |
| | named entity e of Florida. | submits this statement for the | purpose of changing its registere | d office or registered agent, or both, | |
| SIGNATUR | RE: | | | | |
| | Electror | nic Signature of Registered Ac | gent | Date | |
| Election Car | npaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: | PST (|) Delete | Title: | () Change () Addition | |
| Name: | ROGERS, R. D | | Name: | | |
| Address: | 2335 9TH ST. N | N. #507 | Address: | | |
| City-St-Zip: | NAPLES, FL | | City-St-Zip: | | |
| Title: | D (|) Delete | Title: | () Change () Addition | |
| Name: | ROGERS, R. D | | Name: | | |
| Address: | 2335 9TH ST. N | N. #507 | 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: DOUGLAS ROGERS PST 03/25/2009