

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F56705

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** RICHARD S. ALTMAN, D.D.S., P.A.

**Current Principal Place of Business:**

% RICHARD S ALTMAN  
338 C NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**New Principal Place of Business:**

RICHARD S ALTMAN  
338 C NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**Current Mailing Address:**

% RICHARD S ALTMAN  
338 C NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**New Mailing Address:**

RICHARD S ALTMAN  
338 C NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**FEI Number:** 59-2141259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALTMAN, RICHARD S  
338 C NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801 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

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: ALTMAN, RICHARD S  
Address: 338 NORTH MAGNOLIA AVE  
City-St-Zip: ORLANDO, FL 32801

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: RICHARD S. ALTMAN

DR.

01/04/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date