2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2010
Secretary of State

DOCUMENT# F67329

Entity Name: SAMUEL P. ROWE, D.M.D., P.A.

Current Principal Place of Business:

C/O SAMUEL P. ROWE
605 CITRUS AVENUE
FT. PIERCE, FL 349508353

New Principal Place of Business:

C/O SAMUEL P ROWE
605 CITRUS AVENUE
FT PIERCE, FL 349508353

Current Mailing Address:

C/O SAMUEL P. ROWE
605 CITRUS AVENUE
FT. PIERCE, FL 349508353

New Mailing Address:

C/O SAMUEL P ROWE
605 CITRUS AVENUE
FT PIERCE, FL 349508353

FEI Number: 59-2163423 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROWE, SAMUEL P.
605 CITRUS AVENUE
FT. PIERCE, FL 33450 US

Name and Address of New Registered Agent:

ROWE, SAMUEL P
605 CITRUS AVENUE
FT PIERCE, FL 33450 US

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: GARY BERGER 01/27/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: ROWE, SAMUEL P
Address: 605 CITRUS AVE
City-St-Zip: FT PIERCE, FL 34950

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: GARY BERGER CPA 01/27/2010
Electronic Signature of Signing Officer or Director Date