

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G47195

FILED
Feb 07, 2008
Secretary of State

Entity Name: BUTTERICK & HALL, M.D.S, P.A.

Current Principal Place of Business:

303 BRYAN RD
#4
BRANDON, FL 33511

New Principal Place of Business:

302 BRYAN RD
SUITE 2
BRANDON, FL 33511

Current Mailing Address:

303 BRYAN RD
#4
BRANDON, FL 33511

New Mailing Address:

302 BRYAN RD
SUITE 2
BRANDON, FL 33511

FEI Number: 59-2324285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTTERICK, JOHN K. M.D.
303 BRYAN RD
STE 4
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

BUTTERICK, JOHN K. M.D.
302 BRYAN RD
STE2
BRANDON, FL 33511 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: JOHN K. BUTTERICK, M.D.

02/07/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: BUTTERICK, JOHN K.,
Address: 303 BRYAN RD #4
City-St-Zip: BRANDON, FL 33511

Title: D () Delete
Name: HALL, WYNTON L. JR., M.D.
Address: 303 BRYAN RD #4
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DST (X) Change () Addition
Name: BUTTERICK, JOHN K.,
Address: 302 BRYAN RD #2
City-St-Zip: BRANDON, FL 33511

Title: D (X) Change () Addition
Name: HALL, WYNTON L. JR., M.D.
Address: 302 BRYAN RD #2
City-St-Zip: BRANDON, FL 33511

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: JOHN K. BUTTERICK, M.D.

DST

02/07/2008

Electronic Signature of Signing Officer or Director

Date