2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H92275

Entity Name: BOB W. DEASON, D.D.S., P.A.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

765 MILLCREEK ROAD 765 MILL CREEK ROAD

JACKSONVILLE, FL 32211 JACKSONVILLE, FL 32211 US

Current Mailing Address: New Mailing Address:

765 MILL CREEK ROAD 765 MILL CREEK ROAD

JACKSONVILLE, FL 32211 US

FEI Number: 59-2614015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DEASON, BOB W

765 MILL CREEK ROAD

765 MILL CREEK ROAD

JACKSONVILLE, FL 32211 US JACKSONVILLE, FL 32211 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: BOBBY W. DEASON 04/30/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PST
 () Delete
 Title:
 PST
 (X) Change () Addition

 Name:
 DEASON, BOBBY W.,
 Name:
 DEASON, BOBBY W.,

Address: 1895 CORPORATE SQ. BV. Address: 765 MILL CREEK ROAD
City-St-Zip: JACKSONVILLE, FL 32211 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BOBBY W. DEASON PST 04/30/2003