

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Matham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 FEB -2 PM 2:18

DOCUMENT # **J98796** (2)

1. Corporation Name  
**RUSCIN, SCHREIER DENTAL ASSOCIATES, PLANT CITY, P.A.**

Principal Place of Business	Mailing Address
2110 JIM REDMAN PKWY SUITE-A PLANT CITY FL 33566 US	2110 JIM REDMAN PKWY SUITE-A PLANT CITY FL 33566 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified <b>10/26/1987</b>	9a. Date of Last Report <b>04/27/1994</b>
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc. <b>No Suite</b>	22 <b>1409 W. Brandon Blvd</b>
23 City & State	27 Suite, Apt. #, etc.
<b>Brandon FL</b>	
24 Zip	25 Country
<b>33511</b>	
29 Zip	30 Country
<b>33511</b>	

4. FEI Number <b>65-0009942</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**RUSCIN, SCHREIER DENTA  
2110 JIM REDMAN PARKWAY  
PLANT CITY FL 33566**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b> 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>STD</b>
NAME	<b>RUSCIN, RANDY J</b>
STREET ADDRESS	<b>4011 SHADOWHILL LANE</b>
CITY - ST - ZIP	<b>VALRICO FL</b>
TITLE	<b>PD</b>
NAME	<b>SCHREIER, JOHN F</b>
STREET ADDRESS	<b>3025 RIDGE VALE CIR</b>
CITY - ST - ZIP	<b>VALRICO FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Randy J. Ruscin **RANDY J. RUSCIN SEC/TREAS** 1/30/95 813-654-8082

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR