2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2007
Secretary of State

DOCUMENT# K12955

Entity Name: THOMAS R. O'NEIL, D.D.S., P.A.

Current Principal Place of Business:

% THOMAS R. O'NEIL
7707 N UNIVERSITY DR, STE 201
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

% THOMAS R. O'NEIL
7707 N UNIVERSITY DR, STE 201
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 65-0023613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'NEIL, THOMAS R.
7707 N UNIVERSITY DR, STE 201
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

O'NEIL, THOMAS R DDS
7707 N UNIVERSITY DR, STE 201
TAMARAC, FL 33321 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: THOMAS R. O'NEIL, DDS 01/05/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: O'NEIL, THOMAS R.,
Address: 3020 NE 43 ST
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete
Name: O'NEIL, CHRISTINE,
Address: 3020 NE 43 ST
City-St-Zip: FT LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: O'NEIL, THOMAS R DDS
Address: 3020 NE 43 ST
City-St-Zip: FT LAUDERDALE, FL

Title: D (X) Change ( ) Addition
Name: O'NEIL, CHRISTINE
Address: 3020 NE 43 ST
City-St-Zip: FT LAUDERDALE, FL

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS R. O'NEIL, DDS D 01/05/2007
Electronic Signature of Signing Officer or Director Date