2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# K62961

Entity Name: PERIODONTAL ASSOCIATES, P.A.

Current Principal Place of Business:

7301A W PALMETTO PK RD
303-A
BOCA RATON, FL 33433 US

New Principal Place of Business:

Current Mailing Address:

7301 W PALMETTO PK RD
303-A
BOCA RATON, FL 33433 US

New Mailing Address:

FEI Number: 65-0117794 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROSA, HOWARD
6316 DORSAY CT
DELRAY BEACH, FL 33484 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ROSA, HOWARD W.,
Address: 7301 W PALMETTO PK RD, STE 303A
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition
Name: ROSA, HOWARD W.,
Address: 7301 W PALMETTO PK RD, STE 303A
City-St-Zip: BOCA RATON, FL

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: DR. HOWARD ROSA DR. 01/15/2008

Electronic Signature of Signing Officer or Director Date