2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K89575

Entity Name: H.A. RICHARDT, D.D.S., P.A.

FILED Apr 27, 2009 Secretary of State

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

12840 TAMIAMI TRL N 12840 TAMIAMI TRL N

100 SUITE 100

NAPLES, FL 34110 US NAPLES, FL 34110 US

Current Mailing Address: New Mailing Address:

12840 TAMIAMI TR N 12840 TAMIAMI TRL N

OO SUITE 100

NAPLES, FL 34110 US NAPLES, FL 34110 US

FEI Number: 65-0120537 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:

RICHARDT, HELMUT RICHARDT, HELMUT A PRES 12840 TAMIAMI TRAIL N. 12840 TAMIAMI TRAIL SUITE 100

NAPLES, FL 33903 US SOITE 100 NAPLES, FL 34110 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: HELMUT A. RICHARDT 04/27/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: RICHARDT, HELMUT Name: RICHARDT, HELMUT

Address: 12840 TAMIAMI TRAIL N. Address: 12840 TAMIAMI TRAIL N., SUITE 100

City-St-Zip: NAPLES, FL 34110 US

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: HELMUT A. RICHARDT PRES 04/27/2009

Electronic Signature of Signing Officer or Director

Date