## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# L09277

FILED Jul 05, 2007 Secretary of State

Entity Name: RICHARD A. RASMUSSEN, D.D.S., P.A.

Current Principal Place of Business:		New Principal Place of Business:		
450 FLET UITE 340 AMPA, F				
current Mailing Address:		New Mailing Address:		
450 FLET UITE 340 AMPA, F				
El Number	: 59-2971003	FEI Number Applied For ( )	FEI Number Not Applic	able ( ) Certificate of Status Desired ( )
ame and	d Address of C	Current Registered Agent:	Name and A	ddress of New Registered Agent:
UITE 340 AMPA, F	L 33613 US			registered office or registered agent, or b
the State	e of Florida.	submits this statement for the p	urpose of changing its	registered office of registered agent, or b
the State	e of Florida. RE:	nic Signature of Registered Age		Date
the State	e of Florida. RE:	nic Signature of Registered Age	nt	
the State	e of Florida.  RE: Electror  S AND DIREC  P ( )  RASMUSSEN,	nic Signature of Registered Age  TORS:	nt	Date
the State IGNATUF  FFICERS tle: ame: ddress:	e of Florida.  RE: Electror  S AND DIREC  P () RASMUSSEN, 3450 E FLETCH TAMPA, FL	TORS: Delete RICHARD A, . HER AVE, STE 340 Delete REW T ER AVE.	nt  ADDITIONS  Title: Name: Address:	Date  /CHANGES TO OFFICERS AND DIREC
FFICERS de: de: dress: dress: dress: dress: dress: dress:	e of Florida.  RE: Electror  S AND DIREC  P () RASMUSSEN, 1 3450 E FLETCH TAMPA, FL  T () WAITE, MATTH 3450 FLETCHE TAMPA, FL 33	TORS: Delete RICHARD A, . HER AVE, STE 340 Delete REW T ER AVE. 613 Delete NNETH ER AVE.	ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address:	Date  /CHANGES TO OFFICERS AND DIREC  ( ) Change ( ) Addition

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: RICHARD A. RASMUSSEN, III MR. 07/05/2007