

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # L89238

(4)

1. Corporation Name

ROBERT A. STIPANOV, D.D.S., P.A.



Principal Place of Business

10955 BRISTOL BAY DR.  
APT. #124  
BRADENTON FL 34209-7724

Mailing Address

10955 BRISTOL BAY DR.  
APT. #124  
BRADENTON FL 34209-7724

3. Date Incorporated or Qualified  
07/26/1990

3a. Date of Last Report  
04/18/1995

2. Principal Place of Business

21 6060 State Road 70

2a. Mailing Address

26 6060 State Road 70

4. FEI Number

59-3020655

Applied For  
Not Applicable

Suite, Apt., etc.

22 Suite B

Suite, Apt., etc.

27 Suite B

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

City & State

23 Bradenton FL

City & State

28 Bradenton FL

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

Zip

24 34203

Country

25 Manatee

Zip

29 34203

Country

30 Manatee

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

STIPANOV, ROBERT A.  
10955 BRISTOL BAY DR.  
APT. 124  
BRADENTON FL 32409

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

6060 State Road 70

83 Suite B

84 City  
Bradenton

FL 85 Zip Code  
34203

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D  
NAME STIPANOV, ROBERT A.  
STREET ADDRESS 10955 BRISTOL BAY DR #124  
CITY-ST-ZIP BRADENTON FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
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CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE  
12 NAME  
13 STREET ADDRESS 6060 State Road 70, Suite B  
14 CITY-ST-ZIP Bradenton FL

☐ Change ☐ Addition

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

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 119.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/96 (94) 739-8303

CR2E034 (12/95)