

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M72458

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: LARRY W. DUNFORD, D.D.S., P.A.

## Current Principal Place of Business:

LARRY W. DUNFORD  
3209 DEL PRADO BLVD  
CAPE CORAL, FL 33904 US

## New Principal Place of Business:

## Current Mailing Address:

LARRY W. DUNFORD  
3209 DEL PRADO BLVD  
CAPE CORAL, FL 33904 US

## New Mailing Address:

FEI Number: 65-0045194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DUNFORD, LARRY W DDS  
3209 DEL PRADO BLVD  
CAPE CORAL, FL 33904 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: DPS ( ) Delete  
Name: DUNFORD, LARRY W.,  
Address: 12190 OLD RODEO DRIVE  
City-St-Zip: ALVA, FL 33920

Title: S ( ) Delete  
Name: DUNFOLD, TERRI LYNN  
Address: 12190 OLD RODEO DRIVE  
City-St-Zip: ALVA, FL 33920

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: DUNFORD, TERRI LYNN  
Address: 12190 OLD RODEO DRIVE  
City-St-Zip: ALVA, FL 33920

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: TERRILYNN DUNFORD

S

01/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date