2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M86685

BOCA RATON, FL

City-St-Zip:

Entity Name: PETER S. WOHLGEMUTH, D.M.D., P.A.

FILED Mar 22, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
8903 GLAI STE D6					
BOCA RA	TON, FL 3343	4			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
STE D6	DES ROAD,	4	8903 GLADES RD STE DO	104	
			BOCA RATON, FL 334		
FEI Number:	65-0078114	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:					
4439 WOC	MUTH, ILENE DDFIELD BLVE TON, FL 3343)			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () WOHLGEMUTH 8903 GLADES BOCA RATON,	RD, STE. D6	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	DVS () WOHLGEMUTH 4439 WOODFII		Title: Name: Address:	() Change () Addition	

City-St-Zip:

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: PETER WOHLGEMUTH PTD 03/22/2009