

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000040690

FILED  
Feb 04, 2008  
Secretary of State

Entity Name: JAMES F. STONESTREET, D.D.S., P.A.

## Current Principal Place of Business:

2950 ALOMA AVE, SUITE 101  
WINTER PARK, FL 32792

## New Principal Place of Business:

1355 ORANGE AVE  
SUITE 4  
WINTER PARK, FL 32789

## Current Mailing Address:

2950 ALOMA AVE, SUITE 101  
WINTER PARK, FL 32792

## New Mailing Address:

1415 GROVE TERRACE  
WINTER PARK, FL 32789

FEI Number: 59-2131941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WRIGHT, DONALD F  
145 N MAGNOLIA AVE  
ORLANDO, FL 32802 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: PD ( ) Delete  
Name: STONESTREET, JAMES F  
Address: 1415 GROVE TERRACE  
City-St-Zip: WINTER PARK, FL 32789

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: STONESTREET, JAMES F DDS  
Address: 1415 GROVE TERRACE  
City-St-Zip: WINTER PARK, FL 32789

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: JAMES FRANK STONESTREET DDS

PRES

02/04/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date