2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000004720



FILED Apr 20, 2007 8:00 am Secretary of State

4-17-07

1. Entity Name D. SCOTT TRETTENERO, D.D.S., P.A.								·	04-20-2007	•	034 ***1	50.00
Principal Place of Business 12721 WORLD PLAZA LANE BLDG 82 FORT MYERS, FL 33909				Mailing Address 12721 WORLD PLAZA LANE BLDG 82 FORT MYERS, FL 33909			400	721	լեր			
Principal Place of Business - No P.O. Box # 3. Mailing Add					Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			041020	007	Chg-P	CR2E	034 (12/06))
City & State				City & State		4. FEI Number 30-0062869					pplied For lot Applicable	
Zip	Country			Zip	try	y 5. Certificate of Status Desire			\$8.75 Additional Fee Required			
·	6. Name	and Address of Curr	tered Agent	Agent Name			and /	Address of New Re	gistered	Agent		
TRETTENERO, D. SCOTT 12721 WORLD PLAZA LANE BLDG 82 FORT MYERS, FL 33909						Street Addres	is (P.O. Box N	umber	r is Not Acceptable			
8. The above the obligat	named entitions of regist	y submits this statementered agent.	nt for the p	ourpose of changing its	registere	City ed office or regis	stered agent, o	or both	n, in the State of Flo	FL rida. I am	Zip Co	
SIGNATURE.	Signature, typed	or printed name of registered a	gent and title	f applicable. (NOT	E: Registere	d Agent signature requi	ired when reinstatin	ng)	··· · · · · · · · · · · · · · · · · ·	DATE		
FIL After M	E NOW!!! ay 1, 200	FEE IS \$150.00 7 Fee will be \$55	i0.00	9. Election Campa Trust Fund Cont		· – •	5.00 May B dded to Fees	e	_			
10.	OFFICERS AND D			CTORS		ADDITIO	ONS/C	CHANGES TO OFFI	CERS ANI	DIRECTOR	RS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRETTENERO, D. SCOTT DDS 12721 WORLD PLAZA LANE BLDG 82					E Et adoress -St-Zip					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						• • •	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete						· <u></u>	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete			-				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	•						☐ Change	☐ Addition
12. I hereby of indicated	on this repor	t or supplemental repo	nt is true a	ing does not qualify found accurate and that in	r the exe	emptions contain ure shall have th	ie same legal	effect	as if made under or	ath: that I	am an office	r or director