

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050434

**FILED**  
**Apr 23, 2008**  
**Secretary of State**

**Entity Name:** H. A. BEAVER, III DENTAL ASSOCIATES, P.A.

**Current Principal Place of Business:**

3434 ATLANTIC BLVD  
SUITE 7  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

1677 ART MUSEUM DRIVE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

3434 ATLANTIC BLVD  
SUITE 7  
JACKSONVILLE, FL 32207

**New Mailing Address:**

919 GREENRIDGE RD  
JACKSONVILLE, FL 32207

FEI Number: 59-3719802

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BEAVER, HARRION A III  
3434 ATLANTIC BLVD  
SUITE 7  
JACKSONVILLE, FL 32207 US

**Name and Address of New Registered Agent:**

BEAVER, HARRION A III  
1677 ART MUSEUM DR  
JACKSONVILLE, FL 32207 US

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: H.A. BEAVER III

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BEAVER, HARRION A III  
Address: 3434 ATLANTIC BLVD  
City-St-Zip: JACKSONVILLE, FL 32207

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BEAVER, HARRION A III  
Address: 1677 ART MUSEUM DR  
City-St-Zip: JACKSONVILLE, FL 32207

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: H.A. BEAVER III

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date