

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052477

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** TIMOTHY M. TALBOTT, D.D.S., M.S., P.A.

**Current Principal Place of Business:**

4529 EXECUTIVE DRIVE  
SUITE 102  
NAPLES, FL 34119 US

**New Principal Place of Business:**

4521 EXECUTIVE DRIVE  
SUITE 201  
NAPLES, FL 34119 US

**Current Mailing Address:**

4529 EXECUTIVE DRIVE  
SUITE 102  
NAPLES, FL 34119

**New Mailing Address:**

4521 EXECUTIVE DRIVE  
SUITE 201  
NAPLES, FL 34119

**FEI Number:** 65-1108724

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TALBOTT, TIMOHTY M  
4529 EXECUTIVE DRIVE  
SUITE 102  
NAPLES, FL 34119 US

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

TALBOTT, TIMOHTY M  
4521 EXECUTIVE DRIVE  
SUITE 201  
NAPLES, FL 34119 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:

01/05/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: TALBOTT, TIMOHTY M  
Address: 4521 EXECUTIVE DRIVE SUITE 201  
City-St-Zip: NAPLES, FL 34119

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY M TALBOTT

OWNE

01/05/2010

Electronic Signature of Signing Officer or Director

Date