

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000097756

FILED  
Apr 25, 2005  
Secretary of State

**Entity Name:** RONALD J. TREVISANI, DMD, P.A./ORANGE CITY

**Current Principal Place of Business:**

400 TREEMONTE DR  
ORANGE CITY, FL 32763 US

**New Principal Place of Business:**

**Current Mailing Address:**

400 TREEMONTE DR  
ORANGE CITY, FL 32763 US

**New Mailing Address:**

**FEI Number:** 59-3751368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHEN, ROBERT C  
301 S MILWEE ST  
LONGWOOD, FL 32750 US

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

TREVISANI, RONALD J  
2421 RIVERTREE CIRCLE  
SANFORD, FL 32771 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:** RONALD J TREVISANI

04/25/2005

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** TREVISANI, RONALD J  
**Address:** 400 TREEMONTE DR  
**City-St-Zip:** ORANGE CITY, FL 32763 US

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

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** RONALD J TREVISANI

MGMR

04/25/2005

Electronic Signature of Signing Officer or Director

Date