

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000109312

Entity Name: GREGG R. KROEN, D.D.S., P.A.

FILED  
Aug 20, 2006  
Secretary of State

## Current Principal Place of Business:

1299 HOWELL BRANCH RD.  
WINTER PARK, FL 32789

## New Principal Place of Business:

## Current Mailing Address:

1299 HOWELL BRANCH RD.  
WINTER PARK, FL 32789

## New Mailing Address:

FEI Number: 59-3755633

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KROEN, GREGG R  
1299 HOWELL BRANCH RD.  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

KROEN, GREGG R D.D.S.  
1299 HOWELL BRANCH RD.  
WINTER PARK, FL 32789 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: GREGG R KROEN, DDS

08/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DR ( ) Delete  
Name: KROEN, GREGG R  
Address: 1299 HOWELL BRANCH RD.  
City-St-Zip: WINTER PARK, FL 32789

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KROEN, GREGG R D.D.S.  
Address: 1299 HOWELL BRANCH RD.  
City-St-Zip: WINTER PARK, FL 32789

Title: S ( ) Change (X) Addition  
Name: KROEN, ANN Y  
Address: 466 PINEY CROFT LANE  
City-St-Zip: MAITLAND, FL 32751

I hereby certify that the information supplied with this filing does not qualify for the 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: GREGG R KROEN, DDS

P

08/20/2006

Electronic Signature of Signing Officer or Director

Date