2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000001555

Entity Name: RONALD M. MARINI, DMD, PA.

FILED Feb 06, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2921 S. ORLANDO AVENUE				2921 S. ORLANDO AVENUE #146 SANFORD, FL 327734105	
#146 SANFORD, FL 32773					
Current M	lailing Addre	ss:	New Mailing Addre	New Mailing Address:	
945 DYSO WINTER S	ON DRIVE SPRINGS, FL	327084517			
FEI Number	: 01-0598089	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
MARINI, R 945 DYSO WINTER S	N DRIVE	327084517 US			
	e named entity e of Florida.	submits this statement for the p	urpose of changing its registe	red office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	MARINI, RON 945 DYSON D		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MARINI, MARC 945 DYSON D		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ZACKOVA, MA 945 DYSON D		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MARINI, DENI	G OAKS DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	WEITZEL, JÜ 21 FAWN LAN		Title: Name: Address: City-St-Zip:	() Change () Addition	

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 M MARINI P 02/06/2005