

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000079088

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** KATIE M. RAND, D.M.D., P.A.

**Current Principal Place of Business:**

8847 MAPLE HILL COURT  
BOYNTON BEACH, FL 33473

**New Principal Place of Business:**

8855 HYPOLUXO ROAD  
LAKE WORTH, FL 33467

**Current Mailing Address:**

8847 MAPLE HILL COURT  
BOYNTON BEACH, FL 33473

**New Mailing Address:**

**FEI Number:** 01-0738487

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAND, KATIE M DMD PA  
8847 MAPLE HILL COURT  
BOYNTON BEACH, FL 33473 US

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

RAND, KATIE M DMD PA  
8855 HYPOLUXO ROAD  
C8  
LAKE WORTH, FL 33467 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:** KATIE RAND

02/16/2010

Electronic Signature of Registered Agent

Date

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** RAND, KATIE M  
**Address:** 8855 HYPOLUXO ROAD SUITE C8  
**City-St-Zip:** LAKE WORTH, FL 33467

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:** KATIE RAND

PRES

02/16/2010

Electronic Signature of Signing Officer or Director

Date