

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000105342

FILED  
Jan 08, 2007  
Secretary of State

Entity Name: DEVITO ORTHODONTICS, P.A.

## Current Principal Place of Business:

2745 STATE ROAD 580  
#103  
CLEARWATER, FL 33761 US

## New Principal Place of Business:

## Current Mailing Address:

2745 STATE ROAD 580  
#103  
CLEARWATER, FL 33761 US

## New Mailing Address:

FEI Number: 90-0047917      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DEVITO, MICHAEL J  
2745 SR 580  
STE 103  
CLEARWATER, FL 33761 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: DEVITO, MICHAEL  
Address: 2745 STATE ROAD 580, #103  
City-St-Zip: CLEARWATER, FL 33761 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 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: MICHAEL J. DEVITO

PVST

01/08/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date