

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000004315

Entity Name: NANCY A. WILEY, D.D.S., P.A.

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

2000 NE 44 STREET  
SUITE 201  
LIGHTHOUSE POINT, FL 33064

## **New Principal Place of Business:**

4689 N UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33067

## **Current Mailing Address:**

4689 N UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33067

## **New Mailing Address:**

FEI Number: 01-0777097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILEY, NANCY A  
2000 NE 44TH ST  
SUITE 201  
LIGHTHOUSE POINT, FL 33064 US

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

WILEY, NANCY A  
4689 N UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33067 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: NANCY WILEY

04/01/2011

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: WILEY, NANCY A  
Address: 4689 N UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33067

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: NANCY WILEY

PRES

04/01/2011

Electronic Signature of Signing Officer or Director

Date