

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000019861

FILED
Apr 22, 2008
Secretary of State

Entity Name: DR. WILLIAM M. CHAIS D.D.S., P.A.

Current Principal Place of Business:

1151 NW 107TH AVE
PLANTATION, FL 33322 US

New Principal Place of Business:

1766 CAPE CORAL PKWY
107
CAPE CORAL, FL 33904 US

Current Mailing Address:

1151 NW 107TH AVE
PLANTATION, FL 33322 US

New Mailing Address:

1766 CAPE CORAL PKWY
107
CAPE CORAL, FL 33904 US

FEI Number: 20-0667575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAM, CHAIS M
1151 NW 107TH AVE.
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

WILLIAM, CHAIS M
1766 CAPE CORAL
107
CAPE CORAL, FL 33904 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: WILLIAM M CHAIS

04/22/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: CHAIS, WILLIAM M
Address: 1151 NW 107TH AVE
City-St-Zip: PLANTATION, FL 33322 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: CHAIS, WILLIAM M
Address: 1766 CAPE CORAL PKWY #107
City-St-Zip: CAPE CORAL, FL 33904 US

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM M CHAIS

DPS

04/22/2008

Electronic Signature of Signing Officer or Director

Date