

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040373

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: LAKE MARY ENDODONTICS, P.A.

## Current Principal Place of Business:

2543 N LAKE DRIVE  
MILWAUKEE, WI 53211

## New Principal Place of Business:

1513 EDENHALL PT  
HEATHROW, FL 32746

## Current Mailing Address:

2543 N LAKE DRIVE  
MILWAUKEE, WI 53211

## New Mailing Address:

1513 EDENHALL PT  
HEATHROW, FL 32746

FEI Number: 20-0862487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOONEY, STEPHEN R  
800 N MAGNOLIA AVENUE SUITE 1500  
ORLANDO, FL 32803 US

## Name and Address of New Registered Agent:

CAISSIE, TRAVIS  
1513 EDENHALL PT  
HEATHROW, FL 32746 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: TRAVIS CAISSIE

04/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CAISSIE, TRAVIS E DDS  
Address: 2543 N LAKE DRIVE  
City-St-Zip: MILWAUKEE, WI 53211

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CAISSIE, TRAVIS E DDS  
Address: 1513 EDENHALL PT  
City-St-Zip: HEATHROW, FL 32746

Title: D ( ) Change (X) Addition  
Name: CAISSIE, LEE  
Address: 1513 EDENHALL PT  
City-St-Zip: HEATHROW, FL 32746

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: TRAVIS CAISSIE

P

04/30/2005

Electronic Signature of Signing Officer or Director

Date