## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # P05000117508** 

1. Entity Name

KEVIN SCHAPLEY, DMD, P.A.



FILED Feb 05, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

14236 A SOUTH TAMIAMI TRAIL NORTH PORT, FL 34287 14236 A SOUTH TAMIAMI TRAIL NORTH PORT, FL 34287



DO NOT WRITE IN THIS SPACE

01082007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3377240

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145

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6. The above the obligation	named entity submits this statement for the plions of registered agent.	urpose of changing its registere	Lead office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and little	applicable. (NOTE: Registere	d Agent signature required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.	scing \$5.00 May Be Added to Fees	U00000622910 02/13/07-80043-014 150.00
10.	OFFICERS AND DIREC	TORS	No. 1 Section 18	
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NAME				January Committee Committee
STREET ADDRESS				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

C!TY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1129107 941-426