## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000153536

Entity Name: CHRISTIE DENTAL PARTNERS, INC.

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1694-A WEST HIBISCUS BLVD 1674 WEST HIBISCUS BLVD MELBOURNE, FL 32901 MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

1694-A WEST HIBISCUS BLVD 1672 WEST HIBISCUS BLVD MELBOURNE, FL 32901 MELBOURNE, FL 32901

FEI Number: 20-4086499 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MONAGHAN, MATHEW J ESQUIRE HOWZE, MONAGHAN & THERIAC, PLC 96 WILLARD ST STE 302 COCOA, FL 32922 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 P
 ( ) Delete

 Name:
 CHRISTIE, TODD E DR

 Address:
 1694-A WEST HIBISCUS BLVD

 City-St-Zip:
 MELBOURNE, FL 32901

 Title:
 ST
 ( ) Delete

 Name:
 TIMOTHY, CHRISTIE E MR.

 Address:
 1694-A W. HIBISCUS BLVD

 City-St-Zip:
 MELBOURNE, FL 32901

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHRISTIE, TODD E DR
Address: 1672 WEST HIBISCUS BLVD
City-St-Zip: MELBOURNE, FL 32901

Title: ST (X) Change ( ) Addition

Name: TIMOTHY, CHRISTIE E MR. Address: 1672 W. HIBISCUS BLVD City-St-Zip: MELBOURNE, FL 32901

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: TIM CHRISTIE ST 04/17/2008