2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000134513

Address:

City-St-Zip:

6439 NW 43RD TERRACE

BOCA RATON, FL 33496 US

Entity Name: ALAN KELMAN, DDS, P.A.

FILED Apr 22, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	43RD TERRAC TON, FL 33496		5909 SOUTH CONGR ATLANTIS, FL 33462	ESS AVE US	
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	43RD TERRAC TON, FL 33496				
FEI Number:	: 26-1621249	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
BOCA RA	43RD TERRAC TON, FL 33496	S US	e purpose of changing its registered	d office or registered agent, or both,	
	e of Florida.		, p p		
SIGNATUR	RE:				
	Electron	ic Signature of Registered A	gent	Date	
Election Car	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () KELMAN, ALAN 6439 NW 43RD BOCA RATON, I		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () KELMAN, ALAN	Delete	Title: VP Name: KELMAN, SU	(X) Change()Addition JSAN	

Address:

City-St-Zip:

6439 NW 43RD TERRACE

BOCA RATON, FL 33496 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: ALAN KELMAN PRES 04/22/2009