2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000035658

City-St-Zip:

Entity Name: CASI B. STUBBS D.M.D., P.A.

FILED Jan 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4566 E HWY 20 SUITE 102 BLUEWATER BAY, FL 32578 **Current Mailing Address: New Mailing Address:** 9358 ARBORWOOD CIRCLE 4566 E HWY 20 DAVIE, FL 33328 SUITE 102 BLUEWATER BAY, FL 32578 FEI Number: 26-2000523 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STUBBS, CASI B DR 9358 ARBORWOOD CIR DAVIE, FL 33328 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition STUBBS, CASI B DR. Name: Name: 4566 E HWY 20 SUITE 102 Address: Address: City-St-Zip: BLUEWATER BAY, FL 32578 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: STUBBS, ZACHARY A Name: 4566 E HWY 20 SUITE 102 Address: Address: BLUEWATER BAY, FL 32578

City-St-Zip:

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.

VΡ SIGNATURE: ZACK STUBBS 01/09/2009