

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000095752

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Entity Name:** MARK J. DRUSKAT, D.D.S., P.A.

**Current Principal Place of Business:**

2727 SOUTH TAMIAMI TRAIL STE 1  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

2727 SOUTH TAMIAMI TRAIL STE 1  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:** 26-3611585

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEDBETTER, STEVEN W ESQ  
4140 WOODMERE PARK BLVD STE 4  
VENICE, FL 34293 US

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

DRUSKAT, MARK J DDS  
2727 SOUTH TAMIAMI TRAIL STE 1  
SARASOTA, FL 34239 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: MARK J. DRUSKAT, DDS

02/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPST  
Name: DRUSKAT, MARK J DDS  
Address: 2727 SOUTH TAMIAMI TRAIL STE 1  
City-St-Zip: SARASOTA, FL 34239

I hereby 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 all other like empowered.

SIGNATURE: MARK J. DRUSKAT, DDS

DPST

02/01/2011

Electronic Signature of Signing Officer or Director

Date