

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000094694

FILED  
Feb 18, 2010  
Secretary of State

**Entity Name:** ROBERT HEDGEPATH, D.M.D., P.A.

**Current Principal Place of Business:**

991 HIGH POINT DRIVE  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

991 HIGH POINT DRIVE  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 27-1362679

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HEDGEPATH, ROBERT  
991 HIGH POINT DRIVE  
NAPLES, FL 34103 US

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

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: D  
Name: HEDGEPATH, ROBERT  
Address: 991 HIGH POINT DRIVE  
City-St-Zip: NAPLES, FL 34103

Title: P  
Name: HEDGEPATH, ROBERT  
Address: 991 HIGH POINT DRIVE  
City-St-Zip: NAPLES, FL 34103

Title: T  
Name: HEDGEPATH, ROBERT  
Address: 991 HIGH POINT DRIVE  
City-St-Zip: NAPLES, FL 34103

Title: S  
Name: HEDGEPATH, ROBERT  
Address: 991 HIGH POINT DRIVE  
City-St-Zip: NAPLES, FL 34103

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:** ROBERT HEDGEPATH

P

02/18/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date