

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000077046

**FILED**  
**Mar 05, 2011**  
**Secretary of State**

**Entity Name:** RICKY SHAFFREN, DMD, PA.

**Current Principal Place of Business:**

2785 SHAUGHNESSY DR.  
WELLINGTON, FL 33414

**New Principal Place of Business:**

1700 W WOOLBRIGHT RD  
SUITE 2  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

2785 SHAUGHNESSY DR.  
WELLINGTON, FL 33414

**New Mailing Address:**

**FEI Number:** 32-0319415

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATIONS SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 US

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

CORPORATIONS SERVICE CO  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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:** SAME

03/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DTR  
**Name:** SHAFFREN, RICKY S  
**Address:** 2785 SHAUGHNESSY DR.  
**City-St-Zip:** WELLINGTON, FL 33414

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:** RICKY SHAFFREN

DTR

03/05/2011

Electronic Signature of Signing Officer or Director

Date