

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000058055

FILED
Jan 07, 2012
Secretary of State

Entity Name: DR. ANU DESHPANDE, BDS, DMD, MS, P.A.

Current Principal Place of Business:

797 TEAGUE TRAIL / C.R. 25
8108
LADY LAKE, FL 32159 US

New Principal Place of Business:

1850 N. ALAFAYA TRAIL
C
ORLANDO, FL 32826 US

Current Mailing Address:

797 TEAGUE TRAIL / C.R. 25
8108
LADY LAKE, FL 32159 US

New Mailing Address:

1850 N. ALAFAYA TRAIL
C
ORLANDO, FL 32826 US

FEI Number: 45-2601859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESHPANDE, ANU
797 TEAGUE TRAIL / C.R. 25
8108
LADY LAKE, FL 32159 US

Name and Address of New Registered Agent:

DESHPANDE, ANU
1850 N. ALAFAYA TRAIL
C
ORLANDO, FL 32826 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:

01/07/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: DESHPANDE, ANU
Address: 1850 N. ALAFAYA TRAIL, SUITE C
City-St-Zip: ORLANDO, FL 32826

Title: VP
Name: DESHPANDE, ANU
Address: 1850 N. ALAFAYA TRAIL, SUITE C
City-St-Zip: ORLANDO, FL 32826

Title: S
Name: DESHPANDE, ANU
Address: 1850 N. ALAFAYA TRAIL, SUITE C
City-St-Zip: ORLANDO, FL 32826

Title: T
Name: DESHPANDE, ANU
Address: 1850 N. ALAFAYA TRAIL, SUITE C
City-St-Zip: ORLANDO, FL 32826

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: ANU DESHPANDE

P

01/07/2012

Electronic Signature of Signing Officer or Director

Date