2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000016578

Entity Name: RICHARD E. CORLEY, D.D.S., P.A.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14091-A EMERALD COAST PARKWAY DESTIN, FL 32541 **Current Mailing Address: New Mailing Address:** 14091-A EMERALD COAST PARKWAY DESTIN, FL 32541 FEI Number: 59-3170427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARTH, JAMES C BARTH, JAMES C RA 400 SOUTH SHORE DRIVE 400 SOUTH SHORE DRIVE DESTIN, FL 32541 DESTIN, FL 32541 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: JAMES BARTH 04/13/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition CORLEY, RICHARD E Name: Name: 14091-A EMERALD COAST PARKWAY Address: Address: City-St-Zip: DESTIN, FL 32541 City-St-Zip: () Delete Title: () Change (X) Addition Title: RICHARD, CORLEY E PRES Name: Name: 230 KONO WAY Address: Address: City-St-Zip: City-St-Zip: DESTIN, FL 32541 Title: Title: () Delete **PRFS** () Change (X) Addition CORLEY, RICHARD E PRES Name: Name: 230 KONO WAY Address Address: City-St-Zip: City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: **PRES** () Change (X) Addition CORLEY, RICHARD E PRES Name: Name: Address: Address: 230 KONO WAY City-St-Zip: City-St-Zip: DESTIN, FL 32541 Title: Title: PRES () Change (X) Addition () Delete Name: Name: CORLEY, RICHARD E PRES Address: Address: 230 KONO WAY City-St-Zip: City-St-Zip: DESTIN, FL 32541 Title: () Delete Title: **PRES** () Change (X) Addition Name: Name: CORLEY, RICHARD E PRES Address: Address: 230 KONO WAY

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.

City-St-Zip:

DESTIN, FL 32541

SIGNATURE: RICHARD CORLEY PRES 04/13/2009

City-St-Zip: