

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000007043

Entity Name: DIRK G. PRUSIA, D.D.S., P.A.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

151 WYMORE ROAD STE. 600
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

151 WYMORE ROAD STE. 600
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3226664

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRUSIA, DIRK G D.D.S.
6715 SOUTH SYLVAN LAKE DRIVE
SANFORD, FL 32771 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 () Delete
Name: PRUSIA, DIRK G
Address: 6715 S. SYLVAN LAKE DRIVE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: PRUSIA, DIRK G
Address: 6715 S. SYLVAN LAKE DRIVE
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: DIRK G PRUSIA DDS

DR

01/09/2007

Electronic Signature of Signing Officer or Director

_____ Date