

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000094015

Entity Name: JOHN RUSSO, D.D.S., M.H.S., INC.

FILED  
Mar 24, 2009  
Secretary of State

**Current Principal Place of Business:**

1704 BAY ROAD  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

1704 BAY ROAD  
SARASOTA, FL 34239

**New Mailing Address:**

FEI Number: 65-0633487

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSSO, JOHN  
1704 BAY ROAD  
SARASOTA, FL 34239 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: DR ( ) Delete  
Name: RUSSO, JOHN  
Address: 1704 BAY ROAD  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: RUSSO, JOHN

DR.

03/24/2009

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

\_\_\_\_\_  
Date