

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001201

FILED
Apr 15, 2005
Secretary of State

Entity Name: WILLIAM D. NEALE, D.D.S., P.A.

Current Principal Place of Business:

128 N.E. EGLIN PARKWAY
FT. WALTON BEACH, FL 32548

New Principal Place of Business:

824 N.E. EGLIN PARKWAY
FT. WALTON BEACH, FL 32547

Current Mailing Address:

128 N.E. EGLIN PARKWAY
FT. WALTON BEACH, FL 32548

New Mailing Address:

824 N.E. EGLIN PARKWAY
FT. WALTON BEACH, FL 32547

FEI Number: 59-3356886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEALE, WILLIAM D
128 N.E. EGLIN PARKWAY
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

NEALE, WILLIAM D
824 N.E. EGLIN PARKWAY
FT. WALTON BEACH, FL 32547 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:

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NEALE, WILLIAM D
Address: 128 N.E. EGLIN PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: S () Delete
Name: NEALE, KRISTI K
Address: 128 NE EGLIN PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NEALE, WILLIAM D
Address: 824 N.E. EGLIN PARKWAY
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: S (X) Change () Addition
Name: NEALE, KRISTI K
Address: 824 NE EGLIN PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32547

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM D NEALE

D

04/15/2005

Electronic Signature of Signing Officer or Director

Date