

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000103714

FILED  
Jan 28, 2010  
Secretary of State

Entity Name: PATRICIA LYN, D.M.D., P.A.

**Current Principal Place of Business:**

1975 SANSBURY'S WAY  
STE 111  
WEST PALM BEACH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

1975 SANSBURY'S WAY  
STE 111  
WEST PALM BEACH, FL 33411 US

**New Mailing Address:**

FEI Number: 65-0718833      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LYN, PATRICIA E DMD  
1975 SANSBURY'S WAY  
STE 111  
WEST PALM BEACH, FL 33411 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: DPTS  
Name: LYN, PATRICIA E DMD  
Address: 11150 OKEECHOBEE BLVD. SUITE U  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: PATRICIA E LYN DMD

DPTS

01/28/2010

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

\_\_\_\_\_  
Date