

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000008621

FILED
May 01, 2011
Secretary of State

Entity Name: DOUGLAS A. ROLFE, D.D.S., DENTISTRY, P.A.

Current Principal Place of Business:

BOCA PLAZA II
333 CAMINO GARDENS BLVD
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

BOCA PLAZA II
333 CAMINO GARDENS BLVD
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0718281 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROLFE, DOUGLAS A
BOCA PLAZA III
333 CAMINO GARDENS BLVD
BOCA RATON, FL 33432 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

OFFICERS AND DIRECTORS:

Title: P
Name: ROLFE, DOUGLAS A DDS
Address: 333 CAMINO GARDENS BLVD
City-St-Zip: BOCA RATON, FL 33432

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: JAMES R LEIKIN

CPA

05/01/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date