

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000014732

Entity Name: KRISTINE MARSHALL D.D.S., P.A.

FILED
Sep 12, 2005
Secretary of State

Current Principal Place of Business:

4333 BAY TO BAY BLVD
TAMPA, FL 33629

New Principal Place of Business:

2325 ULMERTON ROAD
SUITE 27
CLEARWATER, FL 33762

Current Mailing Address:

4333 BAY TO BAY BLVD
TAMPA, FL 33629

New Mailing Address:

7873 10TH AVE S
ST.PETE, FL 33707

FEI Number: 59-3265536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASRSHALL, KRISTINE
433 BAY TO BAY BLVD
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

MASRSHALL, KRISTINE D.D.S
2325 ULMERTON ROAD
SUITE 27
CLEARWATER, FL 33762 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: KRISTINE MARSHALL,D.D.S

09/12/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARSHALL, KRISTINE
Address: 4333 BAY TO BAY BLVD
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARSHALL, KRISTINE DDS
Address: 2325 ULMERTON ROAD
City-St-Zip: CLEARWATER, FL 33762

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: KRISTINE MARSHALL,D.D.S

DDS

09/12/2005

Electronic Signature of Signing Officer or Director

Date