2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000014909

1. Entity Name JOHN VERVILLE, D.D.S., P.A.



Principal Place of Business

7055 HIGHWAY 17 GREEN COVE SPRINGS, FL 32043 Mailing Address

7055 HIGHWAY 17

GREEN COVE SPRINGS, FL 32043

FILED Feb 20, 2006 08:00 AM Secretary of State

UUU0000441469 03/03/06-80036-016 150.00



DO NOT WRITE IN THIS SPACE

02072006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3433267 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

VERVILLE, JOHN DDS 7055 HWY 17 GREEN COVE SPRINGS, FL 32043

DO NOT WRITE IN THIS SPACE

				(14.)	THO SPACE
	named entity submits this statement for the poins of registered agent.	urpose of changing its registered	d affice or a	registered agent, or both	, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	I applicable. (NOTE: Registered	Agent signatur	s required when reinstating)	CATE
FILE After Ma	NOWIII FEE IS \$150.00 y 1, 2006 Fee will be \$550.00	 Election Campaign Finance Trust Fund Contribution. 	oin g	\$5.00 May Be Added to Fees	
NAME STREET ADDRESS	OFFICERS AND DIRECT D VERVILLE, JOHN 7055 HWY17 GREEN COVE SPRINGS, FL 3 <u>20</u> 43	PTORS		ti ir sunuse sv	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 this seed empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the corporation of the receiver or this seed with an Advises, with all other like empowered.					