2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2009
Secretary of State

DOCUMENT# P97000060578

Entity Name: DAVID M. GULOTTE, D.M.D. & MARIA L. HERNANDEZ, D.D.S., P.A.

Current Principal Place of Business:

28441 US 41
SUITE 206
BONITA SPRINGS, FL 34134

New Principal Place of Business:

Current Mailing Address:

28441 SOUTH TAMIAMI TRAIL
SUITE 206
BONITA SPRINGS, FL 34134

New Mailing Address:

FEI Number: 59-3456771 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLER, JOEL S C.P.A.
5091 EAST TAMIAMI TRAIL
NAPLES, FL 34113 US

Name and Address of New Registered Agent:

MILLER, JOEL S C.P.A.
720 GOODLETTE ROAD N. SUITE #203
NAPLES, FL 34102 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: JOEL MILLER 07/06/2009
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: GULOTTE, DAVID M DR.
Address: 28441 SOUTH TAMIAMI TRAIL STE. 206
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VP ( ) Delete
Name: HERNANDEZ, MARIA L DR.
Address: 28441 SOUTH TAMIAMI TRAIL STE. 206
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID GULOTTE PRES 07/06/2009
Electronic Signature of Signing Officer or Director Date