

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000101147

FILED
Jan 08, 2008
Secretary of State

Entity Name: THREE'S COMPANY, D.M.D., INC.

Current Principal Place of Business:

3203 W. MEDINAH CIR.
LAKE WORTH, FL 33467

New Principal Place of Business:

3203 MEDINAH CIR. WEST
LAKE WORTH, FL 33467

Current Mailing Address:

3203 W. MEDINAH CIRCLE
LAKE WORTH, FL 33467

New Mailing Address:

3203 MEDINAH CIR. WEST
LAKE WORTH, FL 33467

FEI Number: 65-0809443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, L. WESLEY ESQ.
11380 PROSPERITY FARMS RD., SUITE 204
PALM BEACH GARDENS, FL 33410 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: VDS () Delete
Name: MCCALLUM, DOLORES
Address: 3203 MEDINAH CIR. W
City-St-Zip: LAKE WORTH, FL 33467

Title: TD () Delete
Name: MCCALLUM, DANIEL T
Address: 3203 MEDINAH CIR. W
City-St-Zip: LAKE WORTH, FL 33467

Title: PD () Delete
Name: ASVADI, CHRISTINA
Address: 7510 ST ANDREWS RD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DOLORES MCCALLUM

VDS

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date