

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 25, 2007 08:00 A
Secretary of State

DOCUMENT # P98000031679

1. Entity Name
GORDON E. KRUEGER, D.D.S., M.S., P.A.



Principal Place of Business
6740 CROSSWINDS DRIVE SUITE F
ST PETERSBURG, FL 33710

Mailing Address
6740 CROSSWINDS DRIVE SUITE F
ST PETERSBURG, FL 33710



03222007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3502970

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ZSCHAU, JULIUS J
2701 N. ROLKY POINT DRIVE
SUITE 730
TAMPA, FL 33607

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME KRUEGER, GORDON E
STREET ADDRESS 6740 CROSSWINDS DRIVE SUITE F
CITY-ST-ZIP ST PETERSBURG, FL 33710

TITLE
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000000730916
05/08/07-80099-001 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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, trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gordon E. Krueger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/07 727384-6533
Date Daytime Phone #