

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105266

Entity Name: PAUL W. JAKUBOWSKI, D.D.S., P.A.

FILED
Apr 09, 2008
Secretary of State

Current Principal Place of Business:

260 MOHAWK ROAD
CLERMONT, FL 34711

New Principal Place of Business:

235 HATTERAS AVENUE
SUITE 300
CLERMONT, FL 34711

Current Mailing Address:

260 MOHAWK ROAD
CLERMONT, FL 34711

New Mailing Address:

235 HATTERAS AVENUE
SUITE 300
CLERMONT, FL 34711

FEI Number: 59-3549383

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAKUBOWSKI, PAUL W
260 MOHAWK ROAD
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

JAKUBOWSKI, PAUL W
235 HATTERAS AVENUE
SUITE 300
CLERMONT, FL 34711 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: PAUL W JAKUBOWSKI

04/09/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DDS () Delete
Name: JAKUBOWSKI, PAUL W
Address: 260 MOHAWK ROAD
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DDS (X) Change () Addition
Name: JAKUBOWSKI, PAUL W
Address: 235 HATTERAS AVENUE, SUITE 300
City-St-Zip: CLERMONT, FL 34711

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: PAUL W JAKUBOWSKI

DDS

04/09/2008

Electronic Signature of Signing Officer or Director

Date