2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# P99000003260

Entity Name: PAUL L. CHRISTIANSON, D.D.S., P.A.

Current Principal Place of Business:

6765 N WICKHAM RD, SUITE C105
MELBOURNE, FL 32940

New Principal Place of Business:

7135 TURNER ROAD
ROCKLEDGE, FL 32955 57

Current Mailing Address:

6765 N WICKHAM RD, SUITE C105
MELBOURNE, FL 32940

New Mailing Address:

7135 TURNER ROAD
ROCKLEDGE, FL 32955

FEI Number: 59-3553008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHRISTIANSON, PAUL L
6765 N WICKHAM RD, SUITE C105
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

CHRISTIANSON, PAUL L
7135 TURNER ROAD
ROCKLEDGE, FL 32955 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: 01/05/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CHRISTIANSON, PAUL L
Address: 6765 N WICKHAM RD, SUITE C105
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change ( ) Addition
Name: CHRISTIANSON, PAUL L
Address: 7135 TURNER ROAD
City-St-Zip: ROCKLEDGE, FL 32955

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 L CHRISTIANSON PRES 01/05/2009
Electronic Signature of Signing Officer or Director — Date