

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000005311

FILED  
Mar 10, 2011  
Secretary of State

**Entity Name:** CHRISTINE GRANT, D.M.D., P.A.

**Current Principal Place of Business:**

1407 W. SWANN AVE.  
TAMPA, FL 33609

**New Principal Place of Business:**

1407 W. SWANN AVE.  
TAMPA, FL 33606

**Current Mailing Address:**

1407 W. SWANN AVE.  
TAMPA, FL 33609

**New Mailing Address:**

1407 W. SWANN AVE.  
TAMPA, FL 33606

FEI Number: 59-3551579

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GRANT, CHRISTINE  
1407 W. SWANN AVE.  
TAMPA, FL 33609 US

**Name and Address of New Registered Agent:**

GRANT, CHRISTINE DR  
1407 W. SWANN AVE.  
TAMPA, FL 33606 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: DR. CHRISTINE ISOLDE GRANT

03/10/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: GRANT, CHRISTINE  
Address: 1407 W SWANN AVE  
City-St-Zip: TAMPA, FL 33606

I hereby 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 all other like empowered.

SIGNATURE: CHRISTINE ISOLDE GRANT

DR

03/10/2011

Electronic Signature of Signing Officer or Director

Date