

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000010482

FILED
Apr 23, 2009
Secretary of State

Entity Name: PETER N. NGUYEN, DMD, P.A.

Current Principal Place of Business:

15275 COLLIER BLVD
SUITE 204
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

15275 COLLIER BLVD
SUITE 204
NAPLES, FL 34119

New Mailing Address:

FEI Number: 59-3563188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDGINS, THOMAS F
791 10TH STREET SOUTH
SUITE B
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

HUDGINS, THOMAS F
2800 DAVIS BOULEVARD
SUITE 203
NAPLES, FL 34104 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: _____ 04/23/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NGUYEN, PETER N
Address: 15275 COLLIER BLVD. SUITE 204
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST () Delete
Name: NGUYEN, MARCIE C
Address: 15275 COLLIER BLVD., SUITE 204
City-St-Zip: NAPLES, FL 34119

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: MARCIE CARABALLO NGUYEN ST 04/23/2009
Electronic Signature of Signing Officer or Director Date