

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000014938

FILED
Apr 30, 2007
Secretary of State

Entity Name: ROBERT C. FLANARY, D.D.S., P.A.

Current Principal Place of Business:

902 N SUNSET TRAIL
STUART, FL 34994

New Principal Place of Business:

902 N SUNSET TERRACE
STUART, FL 34994

Current Mailing Address:

902 N SUNSET TRAIL
STUART, FL 34994

New Mailing Address:

902 N SUNSET TERRACE
STUART, FL 34994

FEI Number: 65-0895470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLANARY, ROBERT C
902 NW SUNSET TERR.
STUART, FL 34994 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLANARY, ROBERT C
Address: 4276 SW BIMINI CIR.
City-St-Zip: PALM CITY, FL 34990

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: FLANARY, ROBERT C PRES
Address: 902 NW SUNSET TERRACE
City-St-Zip: STUART, FL 34994 US

Title: DR () Change (X) Addition
Name: FLANARY, ROBERT C PRES
Address: 902 NW SUNSET TERRACE
City-St-Zip: STUART, FL 34994 US

Title: DR () Change (X) Addition
Name: FLANARY, ROBERT C PRES
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Address: 902 NW SUNSET TERRACE
City-St-Zip: STUART, FL 34994 US

Title: DR () Change (X) Addition
Name: FLANARY, ROBERT C PRES
Address: 902 NW SUNSET TERRACE
City-St-Zip: STUART, FL 34994 US

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: ROBERT C FLANARY

DR

04/30/2007

Electronic Signature of Signing Officer or Director

Date