

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000057503

FILED
Aug 11, 2005
Secretary of State

Entity Name: JESSICA L. WEAVER, D.M.D., P.A.

Current Principal Place of Business:

995 S.R. 434 N., STE. 502
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

995 S.R. 434 N., STE. 502
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3583086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEAVER, JESSICA L
1842 MARYSVILLE DR
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

WEAVER, JESSICA L
211 CADDIE COURT
DEBARY, FL 32713 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:

Electronic Signature of Registered Agent

08/11/2005

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEAVER, JESSICA
Address: 995 SR 434 N STE 502
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JESSICA WEAVER

Electronic Signature of Signing Officer or Director

PRES

08/11/2005

Date