

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062608

Entity Name: SUZANNE M. WILBUR, D.M.D., P.A.

FILED  
Apr 23, 2010  
Secretary of State

**Current Principal Place of Business:**

800 ZEAGLER DR., STE. 420  
PALATKA, FL 32178

**New Principal Place of Business:**

**Current Mailing Address:**  
800 ZEAGLER DR., STE. 420  
PALATKA, FL 32178

**New Mailing Address:**

FEI Number: 59-3594085      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WILBUR, SUZANNE M DMD  
1833 LOCHARRY LN  
JACKSONVILLE, FL 32259    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: P  
Name: WILBUR, SUZANNE M PA  
Address: 800 ZEAGLER DR SUITE 420  
City-St-Zip: PALATKA, FL 32177

Title: ST  
Name: WILBUR, BRAIN R  
Address: 800 ZEAGLER DRIVE SUITE 420  
City-St-Zip: PALATKA, FL 32177

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: SUZANNE M WILBUR, DMD, PA

PRES

04/23/2010

Electronic Signature of Signing Officer or Director

Date