

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000066087

Entity Name: JILL M. MORRIS, D.M.D., INC.

FILED  
Jan 26, 2008  
Secretary of State

**Current Principal Place of Business:**

601 SARASOTA QUAY  
SARASOTA, FL 342364867

**New Principal Place of Business:**

3951 SWIFT ROAD  
SARASOTA, FL 34231 US

**Current Mailing Address:**

601 SARASOTA QUAY  
SARASOTA, FL 342364867

**New Mailing Address:**

3951 SWIFT ROAD  
SARASOTA, FL 34231 US

FEI Number: 91-1997528

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNDERWOOD, ROBERT L  
537 E. PARK AVE.  
TALLAHASSEE, FL 32301 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: MORRIS, JILL M D.D.S.  
Address: 1515 S. OSPREY A-1  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MORRIS, JILL M D.D.S.  
Address: 3951 SWIFT ROAD  
City-St-Zip: SARASOTA, FL 34231 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: JILL M. MORRIS

PRES

01/26/2008

Electronic Signature of Signing Officer or Director

Date