


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 09, 2007 08:00 A**  
**Secretary of State**


**DOCUMENT # P99000071495**

1. Entity Name  
LARRY ANDERSON, D.D.S., P.A.



Principal Place of Business 877 111TH AVE N STE 3 NAPLES, FL 34108	Mailing Address 877 111TH AVE N STE 3 NAPLES, FL 34108
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**DO NOT WRITE IN THIS SPACE**



01292007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3603239	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> -- \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ANDERSON, LARRY  
877 111TH AVE NORTH  
STE 3  
NAPLES, FL 34108

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

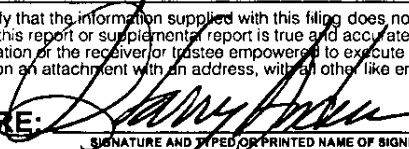
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C ANDERSON, LARRY DR 877 111TH AVE. NORTH STE 3 NAPLES, FL 34108
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03/20/07-80009-017 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:  LARRY ANDERSON

3-7-07 (839)566-7737  
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR