


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2008 08:00 A
Secretary of State

DOCUMENT # P99000075976

1. Entity Name
GREGORY C. STEPANSKI, D.D.S., P.A.



Principal Place of Business Mailing Address

10317 B CROSS CREEK BLVD. 10317B CROSS CREEK BLVD
 TAMPA, FL 33647 TAMPA, FL 33647

DO NOT WRITE IN THIS SPACE



01172008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
59-3596756 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STEPINSKI, GREGORY DDS
 10317B CROSS CREEK BLVD
 TAMPA, FL 33647

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

U00000802979
 02/05/08-80005-025 150.00

10. OFFICERS AND DIRECTORS

| | |
|----------------|---------------------------|
| TITLE | PRES |
| NAME | STEPANSKI, GREGORY C DDS |
| STREET ADDRESS | 10317 B CROSS CREEK BLVD. |
| CITY-ST-ZIP | TAMPA, FL 33647 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
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| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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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 all other like empowered.

SIGNATURE: GREGORY C. STEPANSKI DDS PA Date: 1/30/08 Daytime Phone #: (813) 973-7100