## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#718462**

FILED May 08, 2009 Secretary of State

Entity Name: DENTAL SOCIETY OF GREATER ORLANDO, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

800 N. MILLS AVENUE ORLANDO, FL 328031022

**Current Mailing Address: New Mailing Address:** 

800 N. MILLS AVENUE ORLANDO, FL 328031022

FEI Number: 23-7098111 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

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

LOWELL, LINDA R 800 N. MÍLLS AVENUE ORLANDO, FL 328031022 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

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete CALDERONE, JOSEPH LEMIEUX, PETER Name: Name:

3415 SUMMERHAVEN DR Address: 1185 ORANGE AVE. Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: WINTER PARK, FL 32789

Title: Title: (X) Change ( ) Addition () Delete

Name: TEMPLE, TIM Name: TEMPLE, TIM Address: 610 N MILLS AVENUE Address: 610 N MILLS AVENUE City-St-Zip: ORLANDO, FL 32803 City-St-Zip: ORLANDO, FL 32803

Title: () Delete Title: (X) Change ( ) Addition DAIUTO, CHARLES W Name: DAIUTO, CHARLES W Name:

195 BRIARCLIFF DR STE 111 195 BRIARCLIFF DR STE 111 Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: LONGWOOD, FL 32779

Title: ( ) Delete Title: (X) Change ( ) Addition

Name: BEATTIE, JEFFREY Name: KAHN, BERNARD 1100 LUCERNE TERRACE, STE 100 Address: Address: 926 N MAITLAND AVE City-St-Zip: ORLANDO, FL 32806 City-St-Zip: MAITLAND, FL 32751

Title: Title: () Delete () Change () Addition

BEATTIE, JOHN Name: Name: 401 N. MILLS AVE. Address: Address: ORLANDO, FL 328035750 City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

COLEMAN, BRIAN COLEMAN BRIAN Name: Name: Address: 7200 ALOMA AVE STE D Address: 7200 ALOMA AVE STE D WINTER PARK, FL 32792 WINTER PARK, FL 32792 City-St-Zip: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERNARD KAHN Т 05/08/2009