## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#718462**

FILED Feb 15, 2011 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 ( )

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

LOWELL, LINDA R

800 N. MILLS AVENUE

ORLANDO, FL 328031022 US

HAMILTON, SHARON N

800 N. MILLS 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: SHARON N, HAMILTON 02/15/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: I

Name: LEMIEUX, PETER G Address: 1185 ORANGE AVE. City-St-Zip: WINTER PARK, FL 32789

Title: VP

Name: CORDOBA, JOHN Address: 90 FOX RIDGE CT City-St-Zip: DEBARY, FL 32713

Title: S

Name: JOHNSON, LUCIEN III Address: 1951 S. ALAFAYA TR City-St-Zip: ORLANDO, FL 32828

Title:

Name: KAHN, BERNARD Address: 926 N MAITLAND AVE City-St-Zip: MAITLAND, FL 32751

Title:

Name: BEATTIE, JOHN
Address: 960 LAKE BALDWIN LN
City-St-Zip: ORLANDO, FL 32814

Title: PF

 Name:
 TEMPLE, TIMOTHY

 Address:
 610 N MILLS AVE STE 210

 City-St-Zip:
 ORLANDO, FL 32803

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

SIGNATURE: PETER G. LEMIEUX P 02/15/2011