## 2002 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 753257** 

Entity Name: FLORIDA DENTAL HEALTH FOUNDATION, INC.

FILED Apr 18, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1113 EAST TENNESSEE STREET SUITE 300 TALLAHASSEE, FL 323186914 US					
Current Mailing Address:			New Maili	New Mailing Address:	
C/O DANIEL J. BUKER 1111 E. TENNESSEE ST., TALLAHASSEE, FL 323186914 US					
FEI Number: 59-2019148 FEI Number Applied For ( ) FEI Number			FEI Number Not Appl	icable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
BUKER, DANIEL J. MR. 1111 E. TENNESSEE ST. TALLAHASSEE, FL 32308 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	İ	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VPD () E BELL, HOWARD 3927 BAYMEADO JACKSONVILLE,	DWS RD	Title: Name: Address: City-St-Zip:	PD (X) Change ( ) Addition DIAZ, JOSEPH F 705 W. DEL WEBB BLVD. STE B SUNCITY CENTER, FL 335735258	
Title: Name: Address: City-St-Zip:	SD () E LOW, SAMUEL B P.O. BOX 100434 GAINESVILLE, FI	4	Title: Name: Address: City-St-Zip:	VPD (X) Change ( ) Addition WALKER, LEWIS C 9550 REGENCY SQUARE BLVD #212 JACKSONVILLE, FL 322258165	
Title: Name: Address: City-St-Zip:	MD ()E BUKER, DANIEL 1111 E. TENNES TALLAHASSEE, I	SEE STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () E WALTON, JAMES 1280 TIMBERLAN TALLAHASSEE, I	NE RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () E KLEIN, RAYMON 943 CESERY BL' JACKSONVILLE,	VD.	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition LASTRA, IDALIA 2498 SW THIRD AVE MIAMI, FL 331292031	
Title: Name: Address: City-St-Zip:	VPD () E RUSSELL, WILLI 1334 E CHARTEI JACKSONVILLE,	R COURT	Title: Name: Address: City-St-Zip:	VPD (X) Change ( ) Addition BUCKENHEIMER, TERRY L 3906 W. NEPTURE ST. TAMPA, FL 336295829	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BUKER, DANIEL MD 04/18/2002