

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853364

FILED
Apr 19, 2011
Secretary of State

Entity Name: NATIONAL DENTEX CORPORATION

Current Principal Place of Business:

2 VISION DRIVE
NATICK, MA 01760 US

New Principal Place of Business:

Current Mailing Address:

2 VISION DRIVE
NATICK, MA 01760 US

New Mailing Address:

FEI Number: 04-2762050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Title: PCOO
Name: GREEN, JOHN W IV
Address: 174 WATERCOLOR WAY, #352
City-St-Zip: SANTA ROSA, FL 32459

Title: DCEO
Name: CASPER, STEVEN
Address: 4 GARDNER TERRACE
City-St-Zip: HINGHAM, MA 02043

Title: VPS
Name: BANKS, ELDRIDGE
Address: 2 VISION DRIVE
City-St-Zip: NATICK, MA 01760

Title: VTAS
Name: SCHANTZ, MICHAEL
Address: 2 VISION DRIVE
City-St-Zip: NATICK, MA 01760

Title: VP
Name: DINE, LYNN D
Address: 210 YORKSHIRE
City-St-Zip: NOBLESVILLE, IN 46060

Title: VP
Name: BAKER, DOUGLAS A
Address: 593 E. SILVERLAKE RD. N.
City-St-Zip: TRAVERSE CITY, MI 49684

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

SIGNATURE: MICHAEL SCHANTZ

VTAS

04/19/2011

Electronic Signature of Signing Officer or Director

_____ Date