

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007255

FILED
Feb 24, 2008
Secretary of State

Entity Name: HENRY SCHEIN PPT, INC.

Current Principal Place of Business:

10920 WEST LINCOLN AVENUE
WEST ALLIS, WI 53227

New Principal Place of Business:

Current Mailing Address:

ATTN: EUGINE HELLER
205 JEFFREY DR/
WPOODSTOCK, GA 30188

New Mailing Address:

ATTN: EUGINE HELLER
205 JEFFREY DR
WOODSTOCK, GA 30188

FEI Number: 90-0250136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: ETTINGER, MICHAEL S
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

Title: VT () Delete
Name: SULLIVAN, TIMOTHY J
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

Title: P () Delete
Name: BRESLAWSKI, JAMES
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

Title: V () Delete
Name: HELLER, EUGENE W
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

Title: V () Delete
Name: HOOVER, DENNIS
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

Title: V () Delete
Name: PUCKETT, JAMES
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: SULLIVAN, TIMOTHY J
Address: 10920 WEST LINCOLN AVENUE
City-St-Zip: WEST ALLIS, WI 53227

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE W. HELLER

V

02/24/2008

Electronic Signature of Signing Officer or Director

_____ Date