

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 21, 2000 8:00 am**  
**Secretary of State**

03-21-2000 90099 038 \*\*\*150.00

**DOCUMENT # K08139**

1. Entity Name

**DENTICARE, INC.**

Principal Place of Business

8130 BAYMEADOWS WAY WEST  
 #200  
 JACKSONVILLE FL 32256-7450  
 US

Mailing Address

8130 BAYMEADOWS WAY WEST  
 #200  
 JACKSONVILLE FL 32256-7450  
 US

2. Principal Place of Business

3. Mailing Address

2801 Highway 280, South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Birmingham, Alabama

4. FEI Number

59-1652450

Applied For

Not Applicable

Zip

Country

Zip

Country

35223

Jefferson

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY**  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  Delete  
 NAME **PCOO BARNETT, PETER R**  
 STREET ADDRESS **13601 PRESTON RD STE 500 E**  
 CITY-ST-ZIP **DALLAS TX 75240**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **VPM BENTLEY, DAN**  
 STREET ADDRESS **2801 HWY 280 S**  
 CITY-ST-ZIP **BIRMINGHAM AL**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **S LONG, DEBORAH J**  
 STREET ADDRESS **2801 HWY 280 S**  
 CITY-ST-ZIP **BIRMINGHAM AL**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D HELTON, JAMES T**  
 STREET ADDRESS **2801 HWY 280 S**  
 CITY-ST-ZIP **BIRMINGHAM AL 35223**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **T DEFOOR, J**  
 STREET ADDRESS **2301 HWY 280 S**  
 CITY-ST-ZIP **BIRMINGHAM AL 35223**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **AS BEATTY, EUGENE A**  
 STREET ADDRESS **2801 HWY 280 S**  
 CITY-ST-ZIP **BIRMINGHAM AL 35223**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/2000

Date

205-868-3566

Daytime Phone #

CFR2E034 (9/99)