

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004735

FILED
Jan 31, 2009
Secretary of State

Entity Name: PEDO GATORS, INC.

Current Principal Place of Business:

DEPARTMENT OF PEDIATRIC DENTISTRY
1600 SW ARCHER RD
GAINESVILLE, FL 326100426

New Principal Place of Business:

Current Mailing Address:

DEPARTMENT OF PEDIATRIC DENTISTRY
1600 SW ARCHER RD
GAINESVILLE, FL 326100426

New Mailing Address:

FEI Number: 20-1125248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOMB, TIMOTHY
810 COMMED BLVD #6
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

GLOMB, TIMOTHY
2808 ENTERPRISE RD.
102
DEBARY, FL 32713 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: _____ Date: 01/31/2009
Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARNES, DANIEL
Address: 1126 PELICAN BAY DR
City-St-Zip: DAYTONA BEACH, FL 32119

Title: ST () Delete
Name: ROBYN LESSER,
Address: 12113 W. LINEBAUGH AVE
City-St-Zip: TAMPA, FL 33626

Title: ED () Delete
Name: PRIMOSCH, ROBERT
Address: UNIVERSITY OF FLORIDA P.O. BOX 100426
City-St-Zip: GAINESVILLE, FL 326100426

Title: V () Delete
Name: ROZANSKI, RONALD
Address: 1500 SE 17TH ST BLDG 300
City-St-Zip: OCALA, FL 34471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BARNES, DANIEL
Address: 1440 REED CANAL RD
City-St-Zip: PORT ORANGE, FL 32129

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

SIGNATURE: ROBERT E. PRIMOSCH ED 01/31/2009
Electronic Signature of Signing Officer or Director Date