

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003653

FILED
Mar 01, 2009
Secretary of State

Entity Name: MANATEE DENTAL SOCIETY, INC.

Current Principal Place of Business:

1906 D 59TH ST. WEST
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 20747
BRADENTON, FL 34204

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMEIO, CHARLES C
1906 D 59TH ST. WEST
BRADENTON, FL 34209 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: PD () Delete
Name: GOLDBERG, JOSE M
Address: 6302 MANTEE AVE. WEST, SUITE A
City-St-Zip: BRADENTON, FL 34209

Title: TD () Delete
Name: LOWE, JOSEPH
Address: 818 40TH ST. WEST
City-St-Zip: BRADENTON, FL 34205

Title: SD () Delete
Name: TOMEIO, CHARLES C
Address: 1906 D 59TH ST. WEST
City-St-Zip: BRADENTON, FL 34209

Title: PD () Delete
Name: HYNTON, J. ROBERT
Address: 2235 59TH ST. WEST, SUITE A
City-St-Zip: BRADENTON, FL 34209

Title: D () Delete
Name: PEIRCE, STEPHEN
Address: 6012 26TH ST. WEST
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: J. ROBERT HYNTON

PD

03/01/2009

Electronic Signature of Signing Officer or Director

Date