

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000094204

FILED
Feb 09, 2012
Secretary of State

Entity Name: COAST DENTAL SERVICES, INC.

Current Principal Place of Business:

4010 BOY SCOUT BLVD
1100
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

4010 BOY SCOUT BLVD
1100
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3136131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUIE, PATRICIA
4010 BOY SCOUT BLVD
1100
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: MICHELE HOLDEN

02/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: DIASTI, DEREK DR.
Address: 4010 BOY SCOUT BLVD SUITE 1100
City-St-Zip: TAMPA, FL 33607

Title: D
Name: DIASTI, ADAM DR.
Address: 4010 BOY SCOUT BLVD SUITE 1100
City-St-Zip: TAMPA, FL 33607

Title: D
Name: MARLER, THOMAS J
Address: 4010 BOY SCOUT BLVD SUITE 1100
City-St-Zip: TAMPA, FL 33607

Title: CFOS
Name: KELLY, DONALD
Address: 4010 BOY SCOUT BLVD SUITE 1100
City-St-Zip: TAMPA, FL 33607

Title: CIO
Name: SMITH, MICHAEL
Address: 4010 BOY SCOUT BLVD SUITE 1100
City-St-Zip: TAMPA, FL 33607

Title: VP
Name: HUIE, PATRICIA A
Address: 4010 BOY SCOUT BLVD SUITE 1100
City-St-Zip: TAMPA, FL 33607

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: DEBRA HEIMBURGER

LS

02/09/2012

Electronic Signature of Signing Officer or Director

Date