

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042162

FILED  
Jan 09, 2012  
Secretary of State

**Entity Name:** COLONIAL DENTAL GROUP, P.A.

**Current Principal Place of Business:**

4447 CAMINO REAL WAY  
FT MYERS, FL 33966

**New Principal Place of Business:**

**Current Mailing Address:**

4447 CAMINO REAL WAY  
FT MYERS, FL 33966

**New Mailing Address:**

**FEI Number:** 20-4592436

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAVENAGO, CARLOS J III, ESQ  
2049 SOUTHEAST 27TH TERRACE  
CAPE CORAL, FL 339904 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: PCEO  
Name: CAMPBELL CATLIN, DEIRDRE DMD  
Address: 825 CYPRESS LAKE CIRCLE  
City-St-Zip: FT MYERS, FL 33919

Title: MGR  
Name: CATLIN, JAREN O DMD  
Address: 825 CYPRESS LAKE CIRCLE  
City-St-Zip: FORT MYERS, FL 33919

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: JAREN CATLIN

MGR

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date