

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S22156

FILED
Feb 15, 2009
Secretary of State

Entity Name: FRIENDSHIP CENTER DENTAL OFFICE, INC.

Current Principal Place of Business:

8441 SOUTHWEST STATE ROAD 200
STE 115
OCALA, FL 34481 US

New Principal Place of Business:

2701 SW 34TH ST.
OCALA, FL 34474 US

Current Mailing Address:

8441 SOUTHWEST STATE ROAD 200
STE 115
OCALA, FL 34481 US

New Mailing Address:

2701 SW 34TH ST.
OCALA, FL 34474 US

FEI Number: 59-3061147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCY, DMD B
8441 SW STATE RD., SUITE 115
OCALA, FL 34481 US

Name and Address of New Registered Agent:

BUCY, DMD B
2701 SW 34TH ST
OCALA, FL 34474 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:

02/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUCY, BARBARA DMD
Address: 8441 SW STATE RD 200, STE 115
City-St-Zip: Ocala, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BUCY, BARBARA DMD
Address: 2701 SW 34TH ST
City-St-Zip: Ocala, FL 34474

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

SIGNATURE: BARBARA BUCY, DMD

MGR

02/15/2009

Electronic Signature of Signing Officer or Director

Date