

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702520

Entity Name: EAST COAST DISTRICT DENTAL SOCIETY, INC.**Current Principal Place of Business:**420 S. DIXIE HIGHWAY
SUITE 2-E
CORAL GABLES, FL 33146**Current Mailing Address:**420 S. DIXIE HIGHWAY
SUITE 2-E
CORAL GABLES, FL 33146**FEI Number:** 59-0806565**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARRERO, YOLANDA
420 S DIXIE HIGHWAY
STE 2E
CORAL GABLES, FL 33146 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PAST PRESIDENT
Name	HALL, JEANNETTE DDS
Address	5990 BIRD ROAD
City-State-Zip:	MIAMI FL 33155

Title	PRESIDENT
Name	DIAZ, MARCOS DMD DR.
Address	2239 N. COMMERCE WAY #2
City-State-Zip:	WESTON FL 33326

Title	VP
Name	PALACIOS, PIERO DDS DR.
Address	8740 N KENDALL DR
City-State-Zip:	MIAMI FL

Title	TD
Name	ROMANO, RODRIGO DDS
Address	7701 SW 62 AVENUE,UNIT A-1
City-State-Zip:	SOUTH MIAMI FL 33143

Title	PRESIDENT ELECT
Name	DEROODE, ELAINE DR.
Address	175 SW 7TH ST STE 1408
City-State-Zip:	MIAMI FL 33130

Title	CEO
Name	MARRERO, YOLANDA
Address	420 S. DIXIE HIGHWAY SUITE 2-E
City-State-Zip:	CORAL GABLES FL 33146

Title	SECRETARY
Name	LIMOSANI, MARK DR.
Address	2711 EXECUTIVE PARK DR SUITE 1
City-State-Zip:	WESTON FL 33331

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

SIGNATURE: YOLANDA MARRERO**EXECUTIVE DIRECTOR****01/13/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date