

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 725163

Entity Name: ATLANTIC COAST DISTRICT DENTAL SOCIETY INC

Current Principal Place of Business:

10380 VILLAGE CENTER DR
408
PORT SAINT LUCIE, FL 34987

Current Mailing Address:

10380 SW VILLAGE CENTER DR
408
PORT SAINT LUCIE, FL 34987 US

FEI Number: 59-2224999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORRADO, KATHY . E.D
10380 SW VILLAGE CENTER DR
408
PORT SAINT LUCIE, FL 34987 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: KATHY CORRADO

08/16/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TR
Name PANSICK, ETHAN DR.
Address 6290 LINTON BLVD
104
City-State-Zip: DELRAY BEACH FL 33484

Title PRESIDENT
Name PASQUAL, JOHN DR.
Address 4600 LINTON BLVD
220
City-State-Zip: DELRAY BEACH FL 33445

Title PE
Name HUMBERSON, ALANA DR.
Address 3379 OCEAN DR
City-State-Zip: VERO BEACH FL 32963

Title 1VP
Name STARR, MIKE DR.
Address 1200 CORPORATE CENTER WAY
103
City-State-Zip: WELLINGTON FL 33414

Title 2VP
Name KOLOS, GEORGE DR
Address 2160 NE 63RD COURT
103
City-State-Zip: FORT LAUDERDALE FL 33308

Title ED
Name CORRADO, KATHY C
Address 10380 VILLAGE DR
408
City-State-Zip: PORT SAINT LUCIE FL 34987

Title SECRETARY
Name ATTANASI, RALPH DR.
Address 6290 LINTON BLVD
4
City-State-Zip: DELRAY BRACH FL 33484

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: KATHY CORRADO

EXECUTIVE DIRECTOR

08/16/2021

Electronic Signature of Signing Officer/Director Detail

Date