2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753257

Entity Name: FLORIDA DENTAL HEALTH FOUNDATION, INC.

FILED
Jan 18, 2013
Secretary of State
CC6294171488

Date

Current Principal Place of Business:

1111 EAST TENNESSEE ST TALLAHASSEE. FL 32308-6914

Current Mailing Address:

1111 EAST TENNESSEE ST

TALLAHASSEE. FL 32308-6914 US

FEI Number: 59-2019148 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUKER, DANIEL J 1111 E. TENNESSEE ST. TALLAHASSEE, FL 32308 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: DANIEL J. BUKER 01/18/2013

Electronic Signature of Registered Agent

Officer/Director Detail:

Title VPD Title TD

Name PAYNE, ROBERT W DR. Name RUSSELL, DAVID L DR.
Address 3015 JEFFERSON ST #D Address 14 RACETRACK RD NW

City-State-Zip: MARIANNA FL 32446-2300 City-State-Zip: FT WALTON BEACH FL 32547-1642

Title COO Title PD

NamePAYTON, RUSSELL MRNameWALTON III, JAMES F DR.Address1111 E TENNESSEE STAddress1280 TIMBERLANE RD

City-State-Zip: TALLAHASSEE FL 32308-6914 City-State-Zip: TALLAHASSEE FL 32312-1710

Title SD Title CFO

Name FUTRELL, HARRY C DR. Name MOORE, JACK A

Address 330 W 23RD STREET #J Address 1111 E TENNESSEE ST

City-State-Zip: PANAMA CITY FL 32405-4540 City-State-Zip: TALLAHASSEE FL 32308-6914

Title VP, DIRECTOR Title DIRECTOR

Name DOLAN, TERESA A DR. Name ALLEN, NOLAN W DR.

Address UNIV OF FL COLLEGE OF DENTISTRY Address 1111 EAST TENNESSEE ST

PO BOX 100405 JHMHC City-State-Zip: TALLAHASSEE FL 32308-6914

City-State-Zip: GAINESVILLE FL 32611-0405

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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: JACK A. MOORE CFO

Electronic Signature of Signing Officer/Director Detail

01/18/2013 Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameBUCKENHEIMER, TERRY L DR.NameD'AIUTO, CHARLES W DR.Address1111 EAST TENNESSEE STAddress1111 EAST TENNESSEE STCity-State-Zip:TALLAHASSEE FL 32308-6914City-State-Zip: TALLAHASSEE FL 32308-6914

Title DIRECTOR Title DIRECTOR

Name GORDY, CHANEY B DR. Name LASTRA, IDALIA DR.

Address 1111 EAST TENNESSEE ST Address 1111 EAST TENNESSEE ST

City-State-Zip: TALLAHASSEE FL 32308-6914 City-State-Zip: TALLAHASSEE FL 32308-6914

Title DIRECTOR Title DIRECTOR

Name ATTANASI, RALPH C DR. Name CARR, NATALIE J DR.

Address 1111 EAST TENNESSEE ST Address 1111 EAST TENNESSEE ST

City-State-Zip: TALLAHASSEE FL 32308-6914 City-State-Zip: TALLAHASSEE FL 32308-6914

Title DIRECTOR Title DIRECTOR

Name JERNIGAN, KIM U DR. Name STEVENSON, RICHARD A DR.

Address 1111 EAST TENNESSEE ST Address 1111 EAST TENNESSEE ST

City-State-Zip: TALLAHASSEE FL 32308-6914 City-State-Zip: TALLAHASSEE FL 32308-6914

Title DIRECTOR Title DIRECTOR

Name WALKER, LEWIS C DR. Name WARD, THOMAS H DR.

Address 1111 EAST TENNESSEE ST Address 1111 EAST TENNESSEE ST

City-State-Zip: TALLAHASSEE FL 32308-6914 City-State-Zip: TALLAHASSEE FL 32308-6914