

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000052377

Entity Name: BAXTER DENTAL SERVICES, INC.

Current Principal Place of Business:

818 EAGLE LANE
APOLLO BEACH, FL 33572

Current Mailing Address:

P.O. BOX 4947
TAMPA, FL 33677-4947 US

FEI Number: 45-2562032

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHMIDT, JAMES A
304 SOUTH PLANT AVE
TAMPA, FL 33606 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 D
Name BAXTER, BRANDON
Address 818 EAGLE LANE
City-State-Zip: APOLLO BEACH FL 33572

Title D
Name BAXTER, LINDA
Address 5632 CLEARSITE STREET
City-State-Zip: TORRANCE CA 90505

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: LINDA BAXTER

DIRECTOR

04/05/2013

Electronic Signature of Signing Officer/Director Detail

Date