

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 499124

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** THOMAS H. CARTLEDGE III, D.D.S., M.S., P.A.

**Current Principal Place of Business:**

106 NORTH OLD KINGS RD  
SUITE C  
ORMOND BCH, FL 321749427 US

**New Principal Place of Business:**

**Current Mailing Address:**

106 NORTH OLD KINGS RD  
SUITE C  
ORMOND BCH, FL 321749427 US

**New Mailing Address:**

**FEI Number:** 59-1298436

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CARTLEDGE, THOMAS H III  
106 N OLD KINGS RD  
SUITE C  
ORMOND BCH, FL 321749427 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CARTLEDGE, THOMAS H III  
Address: 106 N OLD KINGS RD #C  
City-St-Zip: ORMOND BCH, FL 32174 US

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: THOMAS H CARTLEDGE III

PRES

01/03/2012

Electronic Signature of Signing Officer or Director

Date