

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 556412

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** CLARE L. GARNER D.D.S. - CHARLES R. HAMBROOK D.D.S., P.A.

**Current Principal Place of Business:**

722 EAST. MCNAB ROAD  
POMPANO BEACH, FL 33060 US

**New Principal Place of Business:**

**Current Mailing Address:**

722 EAST. MCNAB ROAD  
POMPANO BEACH, FL 33060

**New Mailing Address:**

FEI Number: 59-1783597

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAILEY, PATRICK L.  
2335 E. ATLANTIC BLVD.  
POMPANO BEACH, FL 33062 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: GARNER, CLARE L.  
Address: 722 E. MCNAB ROAD  
City-St-Zip: POMPANO BCH., FL 33060

Title: SD  
Name: HAMBROOK, CHARLES R.  
Address: 722 E. MCNAB ROAD  
City-St-Zip: POMPANO BCH, FL 33060

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: CHARLES R HAMBROOK

SD

01/04/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date