2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008
Secretary of State

DOCUMENT# 556679

Entity Name: LAWTON ORTHODONTICS, P.A.

Current Principal Place of Business:

201 N LAKEMONT AVE
WINTER PARK, FL 32792

New Principal Place of Business:

201 N LAKEMONT AVE
400
WINTER PARK, FL 32792

Current Mailing Address:

201 N LAKEMONT AVE
WINTER PARK, FL 32792

New Mailing Address:

201 N LAKEMONT AVE
400
WINTER PARK, FL 32792

FEI Number: 59-1783253 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAWTON, THOMAS C
201 NORTH LAKEMONT AVE
WINTER PARK, FL 32792 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: LAWTON, THOMAS C,
Address: 201 N LAKEMONT AVE
City-St-Zip: WINTER PARK, FL

Title: D ( ) Delete
Name: LAWTON, THOMAS C,
Address: 201 N LAKEMONT AVE
City-St-Zip: WINTER PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS C LAWTON DMD PST 01/08/2008
Electronic Signature of Signing Officer or Director — Date