

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702520

FILED
Jan 12, 2010
Secretary of State

Entity Name: EAST COAST DISTRICT DENTAL SOCIETY, INC.

Current Principal Place of Business:

420 S. DIXIE HIGHWAY
SUITE 2-E
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

420 S. DIXIE HIGHWAY
SUITE 2-E
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 59-0806565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARRERO, YOLANDA
420 S DIXIE HIGHWAY
STE 2E
CORAL GABLES, FL 33146 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: GAY, JOSEPH DDS
Address: 18063 N.W. 27TH AVE
City-St-Zip: OPA LOCKA, FL 33056

Title: VD
Name: DOMINGUEZ, ORLANDO DDS
Address: 9280 S.W. 150 AVE, STE 104
City-St-Zip: MIAMI, FL 33196

Title: SD
Name: IRENE, MARRON DMD
Address: 801 BRICKELL KEY BLVD, #7
City-St-Zip: MIAMI, FL 33131

Title: TD
Name: PENNA-HALL, JEANNETTE
Address: 5990 BIRD ROAD
City-St-Zip: MIAMI, FL 33155

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: YOLANDA MARRERO

EXEC

01/12/2010

Electronic Signature of Signing Officer or Director

Date