

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705514

FILED
Jul 11, 2005
Secretary of State

Entity Name: THE FLORIDA ASSOCIATION OF ORTHODONTISTS, INC.

Current Principal Place of Business:

LISSETTE ADKINS
5100 BURCHETTE RD #3300
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

LISSETTE ADKINS
5100 BURCHETTE RD #3300
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-1313117 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEMES, LISSETTE M MS.
5100 BURCHETTE RD #3300
TAMPA, FL 33647 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: P () Delete
Name: CARDEN, DAVID R DR
Address: 3540 S THIRD ST
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: V () Delete
Name: JACOBUS, BRIAN B DR
Address: 1100 SW ST. LUCIE W BLVD #207
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: S, T () Delete
Name: CORO, JORGE DR
Address: 896 S DIXIE HWY
City-St-Zip: CORAL GABLES, FL 33146 US

Title: D () Delete
Name: TAPLEY, PATRICIA M DR
Address: 320 NORTHWEST 76TH DR
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D () Delete
Name: RIGSBY, RANDALL P DR
Address: 3969 SPANISH TRAIL
City-St-Zip: PENSECOLA, FL 32504 US

Title: D () Delete
Name: RALPH, DEDOMENICO DR.
Address: 11012 N DALE MABRY
City-St-Zip: TAMPA, FL 33618 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PP (X) Change () Addition
Name: CARDEN, DAVID R DR
Address: 3540 S THIRD ST
City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: P (X) Change () Addition
Name: JACOBUS, BRIAN B DR
Address: 1100 SW ST. LUCIE W BLVD #207
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: FVP (X) Change () Addition
Name: CORO, JORGE DR
Address: 896 S DIXIE HWY
City-St-Zip: CORAL GABLES, FL 33146 US

Title: S/T (X) Change () Addition
Name: TAPLEY, PATRICIA M DR
Address: 320 NORTHWEST 76TH DR
City-St-Zip: GAINESVILLE, FL 32607 US

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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA TAPLEY

S/T

07/11/2005

Electronic Signature of Signing Officer or Director

Date