

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713844

FILED
Jan 03, 2012
Secretary of State

Entity Name: NORTHEAST DISTRICT DENTAL ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

3733 UNIVERSITY BLVD. W.
SUITE 205
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

3733 UNIVERSITY BLVD. W.
SUITE 205
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 51-0141516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLENS, RICK C
3215 HENDRICKS AVE
#1
JACKSONVILLE, FL 32207 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: VP
Name: HANANIA, SAM
Address: 14815 MANDARIN RD. STE. #101
City-St-Zip: JACKSONVILLE, FL 32223

Title: PD
Name: MICHAEL, CHANATRY
Address: 3595 CARDINAL POINT DR
City-St-Zip: JACKSONVILLE, FL 32257

Title: P
Name: JAMES, SCHUMACHER
Address: 4210 ROOSEVELT BLVD.
City-St-Zip: JACKSONVILLE, FL 32210

Title: TD
Name: COCHRAN, STEVE
Address: 8355 BAYBERRY RD.
City-St-Zip: JACKSONVILLE, FL 32256

Title: S
Name: TROTTER, LINDA
Address: 2532 OAK STREET
City-St-Zip: JACKSONVILLE, FL 32204

Title: TR
Name: MULLENS, RICK C
Address: 3215 HENDRICKS AVE #1
City-St-Zip: JACKSONVILLE, FL 32207

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: DEBBIE DEVILLE

ED

01/03/2012

Electronic Signature of Signing Officer or Director

Date