

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717350

FILED
Jan 11, 2009
Secretary of State

Entity Name: FLORIDA SOCIETY OF ENDODONTICS, INC.

Current Principal Place of Business:

11655 SW 21ST PL
DAVIE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

11655 SW 21ST PL
DAVIE, FL 33325 US

New Mailing Address:

FEI Number: 59-2598993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPLAN, FRED
11655 SW 21ST PL
DAVIE, FL 33325 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: KEOUGH, LEE ANNE
Address: 2701 SW 34TH ST
City-St-Zip: OCALA, FL 344744471

Title: V () Delete
Name: KAPLAN, FRED
Address: 11655 SW 21ST PL
City-St-Zip: DAVIE, FL 33325

Title: ST () Delete
Name: TEMPLE, TIMOTHY
Address: 610 N. MILK AVE #210
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KAPLAN, FRED I
Address: 11655 SW 21ST PLACE
City-St-Zip: DAVIE, FL 33325 US

Title: V (X) Change () Addition
Name: TEMPLE, TIMOTHY
Address: 610 N. MILK AVE. STE.210
City-St-Zip: ORLANDO, FL 32803 US

Title: ST (X) Change () Addition
Name: DOWLING, PATTI C
Address: 6150 METROWEST BLVD. STE 301
City-St-Zip: ORLANDO, FL 32835 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED I. KAPLAN

P

01/11/2009

Electronic Signature of Signing Officer or Director

Date