2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725163

FILED May 01, 2012 Secretary of State

Entity Name: ATLANTIC COAST DISTRICT DENTAL SOCIETY INC

Current Principal Place of Business: New Principal Place of Business:

5700 LAKE WORTH RD.

207C

LAKE WORTH, FL 33463

Current Mailing Address: New Mailing Address:

5700 LAKE WORTH RD.

LAKE WORTH, FL 33463

FEI Number: 23-7424048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DVORAK, MICHAEL E.D. 5700 LAKE WORTH ROAD 207C LAKE WORTH, FL 33463 US

LAKE WORTH, FL 33463 US

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

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OFFICERS AND DIRECTORS:

Title: F

Name: MCDONALD, BRUCE Address: 880 37TH PLACE

City-St-Zip: VERO BEACH, FL 32963 US

Title: PE

 Name:
 ADELSON, ANDREW

 Address:
 1309 FLAGLER DR., SUITE 4

 City-St-Zip:
 WEST PALM BEACH, FL 33401 US

Title: TR

Name: PANSICK, ETHAN DR.
Address: 14000 MILITARY TRAIL
City-St-Zip: DELRAY BEACH, FL 33484 US

Title: 1VP

 Name:
 PATTEN, MICHAEL DR.

 Address:
 300 NW 70TH AVE.

 City-St-Zip:
 PLANTATION, FL 33317 US

Title: 2VF

Name: GLERUM, KAREN DR.
Address: 5569 MARSEILLES PT. LANE
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: SEC

Name: DETURE, CHRISTOPHER DR Address: 800 BROWARD BLVD., SUITE 706 City-St-Zip: FT. LAUDERDALE, FL 33301 US

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: MICHAEL DVORAK E.D. 05/01/2012