

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728325

FILED
Mar 05, 2009
Secretary of State

Entity Name: FLORIDA ACADEMY OF GENERAL DENTISTRY, INC.

Current Principal Place of Business:

2380 NW 12TH ST.
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

2380 NW 12TH ST.
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 23-7354466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMALL, ROSALIE A
2380 NW 12TH ST.
DELRAY BEACH, FL 33445 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: PRES () Delete
Name: STILLWELL, DAVID DDS
Address: 822 SW 85 WAY
City-St-Zip: GAINESVILLE, FL 32607

Title: PE () Delete
Name: GORDON, HARVEY DDS
Address: 1051 N. 35TH AVE., SUITE 202
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: SHAW, RODERICK DMD
Address: 317 N. DUVAL ST.
City-St-Zip: MADISON, FL 32340

Title: SEC () Delete
Name: TASSI, IRMA
Address: 2109 BAYSHORE BLVD. #403
City-St-Zip: TAMPA, FL 33606

Title: TREA () Delete
Name: UNDERWOOD, ALFRED H
Address: 1399 NW 17TH AVE., SUITE 301
City-St-Zip: MIAMI, FL 33125

Title: IPP () Delete
Name: KESSLER, MELVIN DDS
Address: 7400 N. KENDALL DR., SUITE 512
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GORDON, HARVEY DDS
Address: 4949 SW 33RD WAY
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: PE (X) Change () Addition
Name: RODERICK, SHAW DMD
Address: 255 NE. DUVAL ST.
City-St-Zip: MADISON, FL 32340

Title: VP (X) Change () Addition
Name: THOMAS, E. DONALD DMD
Address: 201 N LAKEMONT AVE STE 300
City-St-Zip: WINTER PARK, FL 32792

Title: SEC (X) Change () Addition
Name: TASSI, IRMA DMD
Address: 2109 BAYSHORE BLVD. #403
City-St-Zip: TAMPA, FL 33606

Title: TREA (X) Change () Addition
Name: UNDERWOOD, ALFRED H DDS
Address: 1399 NW 17TH AVE., SUITE 301
City-St-Zip: MIAMI, FL 33125

Title: IPP (X) Change () Addition
Name: STILLWELL, DAVID DDS
Address: 822 SW 85 WAY
City-St-Zip: GAINESVILLE, FL 32607

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: DR. ALFRED H. UNDERWOOD

TREA

03/05/2009

Electronic Signature of Signing Officer or Director

Date