

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731768

FILED
Jan 10, 2006
Secretary of State

Entity Name: WEST PASCO DENTAL ASSOCIATION OF FLORIDA, INC.

Current Principal Place of Business:

34911 US HWY 19 N
624
PALM HARBOR, FL 34684

New Principal Place of Business:

11839 OAK TRAIL WAY
PORT RICHEY, FL 34668

Current Mailing Address:

34911 US HWY 19 N
624
PALM HARBOR, FL 34684

New Mailing Address:

11839 OAK TRAIL WAY
PORT RICHEY, FL 34668

FEI Number: 59-1999958

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOLINO, SCOTT N
34911 US HWY 19 N
624
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

GRIFFITH, SCOTT R
11839 OAK TRAIL WAY
PORT RICHEY, FL 34668 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: SCOTT R. GRIFFITH

01/10/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MITCHELL, MARK W
Address: 6731 MADISON ST.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VD () Delete
Name: STEIN, JEFFREY M
Address: 6906 MADISON ST
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: TD () Delete
Name: MITCHELL, MARK W
Address: 6931 MADISON ST
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD () Delete
Name: MITCHELL, MARK W
Address: 6731 MADISON STREET
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: ST (X) Delete
Name: FOLINO, SCOTT N
Address: 34911 US HWY 19 N SUITE 624
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MITCHELL, MARK W
Address: 6731 MADISON ST.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: PE (X) Change () Addition
Name: FOLINO, SCOTT N
Address: 34911 US HWY 19 N SUITE 624
City-St-Zip: PALM HARBOR, FL 34684

Title: VP (X) Change () Addition
Name: GRASSIN, FRED
Address: 4392 COMMERCIAL WAY
City-St-Zip: SPRING HILL, FL 34606

Title: S/T (X) Change () Addition
Name: GRIFFITH, SCOTT R
Address: 11839 OAK TRAIL WAY
City-St-Zip: PORT RICHEY, FL 34668

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 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: SCOTT R. GRIFFITH

S/T

01/10/2006

Electronic Signature of Signing Officer or Director

Date