2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744697

FILED Jul 21, 2008 Secretary of State

Entity Name: CLAY COUNTY DENTAL SOCIETY, INC.

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

1409 KINGSLEY AVE 2233 PARK AVE

BLDG 5 STE 401

ORANGE PARK, FL 32073 US ORANGE PARK, FL 32073 US

Current Mailing Address: New Mailing Address:

1409 KINGSLEY AVE 2233 PARK AVE

BLDG 5 STE 401

ORANGE PARK, FL 32073 US ORANGE PARK, FL 32073 US

FEI Number: 59-1983290 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CAPUTA, LEWIS A JR
SHERMAN, MICHAEL A
1409 KINGSLEY AVE, #5
2233 PARK AVE

ORANGE PARK, FL 32073 US STE 401

ORANGE PARK, FL 32073 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: MICHAEL A. SHERMAN 07/21/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:D() DeleteTitle:S(X) Change () AdditionName:MCCLURE, MICHAEL TName:MCCLURE, MICHAEL TAddress:1665 EAGLE HARBOR PKWYAddress:1665 EAGLE HARBOR PKWYCity-St-Zip:ORANGE PARK, FL 32003 USCity-St-Zip:ORANGE PARK, FL 32003 US

Title: V () Delete Title: P (X) Change () Addition

Name: MARTINEZ, ELAINE Name: MARTINEZ, ELAINE

Address: 1530 BUSINESS CENTER DRIVE, STE 1 Address: 1530 BUSINESS CENTER DRIVE, STE 1

City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 32003

 Name:
 CAPUTA, LEWIS A JR
 Name:
 SHERMAN, MICHAEL A

 Address:
 1409 KINGSLEY AVE #5
 Address:
 2233 PARK AVE STE 401

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:
 ORANGE PARK, FL 32073

Title: D () Delete Title: () Change () Addition

Name:VANOVER, MICHAELName:Address:784 BLANDING BLVDAddress:City-St-Zip:ORANGE PARK, FL 32065City-St-Zip:

Name: STAKEM, THOMAS Name: STAKEM, THOMAS

 Address:
 7075-01 US HWY 17 SOUTH
 Address:
 7075-01 US HWY 17 SOUTH

 City-St-Zip:
 GREEN COVE SPRINGS, FL 32043
 City-St-Zip:
 GREEN COVE SPRINGS, FL 32043

Title: P () Delete Title: D (X) Change () Addition

Name: MURRAY, EDWARD Name: GEIGER, JULIE

Address: 6001-4 ARGYLE FOREST BLVD Address: 1665 EAGLE HARBOR PKWY E City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: ORANGE PARK, FL 32003

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: MICHAEL A. SHERMAN T 07/21/2008