

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747424

FILED
Apr 03, 2012
Secretary of State

Entity Name: THE FLORIDA ACADEMY OF DENTAL PRACTICE ADMINISTRATION INC.

Current Principal Place of Business:

2902 TIMBER KNOLL DR
VALRICO, FL 33596

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2920
BRANDON, FL 33509

New Mailing Address:

FEI Number: 59-1962328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIMBERLY, SHARON A
2902 TIMBER KNOLL DR.
VALRICO, FL 33596 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: DP
Name: CARAZOLA, JAMES L DMD
Address: 3003 ENTERPRISE RD. E
City-St-Zip: CLEARWATER, FL 33759 US

Title: DPE
Name: STEVENSON, RICHARD DDS
Address: 6851 BELFORT OAKS PL.
City-St-Zip: JACKSONVILLE, FL 33759 US

Title: DVP
Name: RITOTA, JOHN P DDS
Address: 3401 S. FEDERAL HWY.
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: DS
Name: TSCHIRHART, BRIAN A DDS
Address: 444 BRICKELL AVE. STE 48
City-St-Zip: MIAMI, FL 33131

Title: DT
Name: DORRIS, GEORGE B JR, DDS
Address: 6 PEMBROKE PLACE
City-St-Zip: FT. WALTON BEACH, FL 32548 US

Title: ED
Name: WIMBERLY, SHARON A
Address: 2902 TIMBER KNOLL DR
City-St-Zip: VALRICO, FL 33596

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: SHARON A. WIMBERLY

ED

04/03/2012

Electronic Signature of Signing Officer or Director

Date