

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006075

FILED
Apr 12, 2007
Secretary of State

Entity Name: DONALD MARTIN, C.D.T. DENTAL STUDIO, INC.

Current Principal Place of Business:

3 HARGROVE GRADE, SUITE 2
PALM COAST, FL 32127

New Principal Place of Business:

Current Mailing Address:

3 HARGROVE GRADE
SUITE #2
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 04-2629004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, DONALD
3 HARGROVE GRADE, SUITE 2
PALM COAST, FL 32127 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MARTIN, DONALD G
Address: 42 LAGARE ST
City-St-Zip: PALM COAST, FL 32137

Title: DT () Delete
Name: MARTIN, ANNE F
Address: 42 LAGARE ST
City-St-Zip: PALM COAST, FL 32137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE F. MARTIN

DT

04/12/2007

Electronic Signature of Signing Officer or Director

Date