

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000002857

FILED
Apr 29, 2011
Secretary of State

Entity Name: HEARTLAND DENTAL CARE, INC.

Current Principal Place of Business:

1200 NETWORK CENTRE DRIVE
SUITE 2
EFFINGHAM, IL 62401

New Principal Place of Business:

Current Mailing Address:

1200 NETWORK CENTRE DRIVE
SUITE 2
EFFINGHAM, IL 62401

New Mailing Address:

FEI Number: 01-0854205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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
Name: BAUER, PAT
Address: 1200 NETWORK CENTRE DRIVE SUITE 2
City-St-Zip: EFFINGHAM, IL 62401

Title: SEC
Name: SLACK, JOHN
Address: 1200 NETWORK CENTRE DRIVE SUITE 2
City-St-Zip: EFFINGHAM, IL 62401

Title: BOD
Name: WORKMAN, RICHARD DR.
Address: 1200 NETWORK CENTRE DRIVE SUITE 2
City-St-Zip: EFFINGHAM, IL 62401

Title: BOD
Name: BAUER, PAT
Address: 1200 NETWORK CENTRE DRIVE SUITE 2
City-St-Zip: EFFINGHAM, IL 62401

Title: BOD
Name: FORMOLO, THOMAS
Address: 10 S. WACKER DR., STE 3175
City-St-Zip: CHICAGO, IL 60606

Title: BOD
Name: LHEE, EDWARD
Address: 10 S. WACKER DR., STE 3175
City-St-Zip: CHICAGO, IL 60606

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

SIGNATURE: JOHN SLACK

SEC

04/29/2011

Electronic Signature of Signing Officer or Director

Date