

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001538

FILED
Apr 20, 2011
Secretary of State

Entity Name: SCION DENTAL, INC.

Current Principal Place of Business:

10201 NORTH PORT WASHINGTON ROAD
MEQUON, WI 53092

New Principal Place of Business:

Current Mailing Address:

10201 NORTH PORT WASHINGTON ROAD
MEQUON, WI 53092

New Mailing Address:

FEI Number: 26-4595216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DRIVE
SUITE A
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: CDP
Name: KASTEN, CRAIG R
Address: 10201 NORTH PORT WASHINGTON ROAD
City-St-Zip: MEQUON, WI 53092

Title: DCEO
Name: BORCA, GREGORY J
Address: 10201 NORTH PORT WASHINGTON ROAD
City-St-Zip: MEQUON, WI 53092

Title: ST
Name: SWEENEY, LISA A
Address: 10201 NORTH PORT WASHINGTON ROAD
City-St-Zip: MEQUON, WI 53092

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: LISA A SWEENEY

ST

04/20/2011

Electronic Signature of Signing Officer or Director

Date