

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F26561

FILED
Jan 08, 2008
Secretary of State

Entity Name: LAWTON DENTAL LABORATORY, INC.

Current Principal Place of Business:

% THOMAS C LAWTON, D.M.D.
201 N LAKEMONT AVENUE
WINTER PARK, FL 327923211

New Principal Place of Business:

Current Mailing Address:

% THOMAS C LAWTON, D.M.D.
201 N LAKEMONT AVENUE
WINTER PARK, FL 327923211

New Mailing Address:

FEI Number: 59-3080896 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LAWTON, THOMAS C., DMD
201 N LAKEMONT AVENUE
WINTER PARK, FL US

Name and Address of New Registered Agent:

LAWTON, THOMAS C., DMD
201 N LAKEMONT AVENUE
WINTER PARK, FL 32792 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: _____ 01/08/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAWTON, THOMAS C, DM, D
Address: 201 N LAKEMONT AVE
City-St-Zip: WINTER PARK, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: LAWTON, THOMAS C, DM, D
Address: 201 N LAKEMONT AVE
City-St-Zip: WINTER PARK, FL 32792

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

SIGNATURE: THOMAS C. LAWTON, DMD DR 01/08/2008
Electronic Signature of Signing Officer or Director Date