

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000004714

FILED  
Jan 12, 2004  
Secretary of State

Entity Name: ORTHODONTIC CENTERS OF FLORIDA, INC.

## Current Principal Place of Business:

1488 APALACHEE PARKWAY  
TALLAHASSEE, FL 32301

## New Principal Place of Business:

## Current Mailing Address:

3850 N CAUSEWAY BLVD  
SUITE 800  
METAIRIE, LA 70002

## New Mailing Address:

FEI Number: 72-1277097      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NATIONAL REGISTERED AGENTS  
526 E PARK AVENUE  
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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PALMISANO, BARTHOLOMEW F SR.  
Address: 3850 N CAUSEWAY BLVD, SUITE 1040  
City-St-Zip: METAIRIE, LA 70002

Title: S ( ) Delete  
Name: PALMISANO, BARTHOLOMEW F JR.  
Address: 3850 N CAUSEWAY BLVD, SUITE 1040  
City-St-Zip: METAIRIE, LA 70002

Title: T ( ) Delete  
Name: SANDEMAN, THOMAS  
Address: 3850 N CAUSEWAY BLVD #800  
City-St-Zip: MATEINE, LA 70002

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition  
Name: PALMISANO, BARTHOLOMEW F JR.  
Address: 3850 N CAUSEWAY BLVD, SUITE 1040  
City-St-Zip: METAIRIE, LA 70002

Title: T (X) Change ( ) Addition  
Name: SANDEMAN, THOMAS  
Address: 3850 N CAUSEWAY BLVD #800  
City-St-Zip: MEATAIRIE, LA 70002

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BART PALMISANO, JR.

SD

01/12/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date