

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000000600

1. Entity Name

DENTAL HEALTH ADMINISTRATIVE AND COUNSELING SERV

Principal Place of Business

2001 BUTTERFIELD ROAD, STE 900
DOWNERS GROVE IL 60515-1050

Mailing Address

2001 BUTTERFIELD ROAD, STE 900
DOWNERS GROVE IL 60515-1050

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-2894278

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME RHONE, JAMES R
STREET ADDRESS 2001 BUTTERFIELD ROAD, STE 900
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE P
NAME DENNISON, ROBERT E.
STREET ADDRESS 2001 Butterfield Road, Ste 900
CITY-ST-ZIP Downers Grove IL 60515 ☒ Change ☐ Addition

TITLE V
NAME BERGER, MICHAEL
STREET ADDRESS 2001 BUTTERFIELD ROAD, STE 900
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME FISHER-GABLE, HAZEL
STREET ADDRESS 2001 BUTTERFIELD ROAD, STE 900
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE T
NAME LLOYD, MICHAEL T
STREET ADDRESS 2001 BUTTERFIELD ROAD, STE 900
CITY-ST-ZIP DOWNERS GROVE IL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME AKAL, CALVIN D
STREET ADDRESS 2001 BUTTERFIELD ROAD, STE 900
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME KEARNS, GEORGE D
STREET ADDRESS 2001 BUTTERFIELD ROAD, STE 900
CITY-ST-ZIP DOWNERS GROVE IL 60515 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert E. Dennison
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/2000

Date

(800) 552-2043

Daytime Phone #

CR2E034 (9/99)

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90015 008 ***158.75

00042033



DO NOT WRITE IN THIS SPACE

DENTAL HEALTH ADMINISTRATIVE & CONSULTING SERVICES, INC.

FLORIDA DEPARTMENT OF STATE
2000 UNIFORM BUSINESS REPORT (UBR)

LIST OF OFFICERS AND DIRECTORS

**NAME
SOCIAL SECURITY NUMBER
POSITION**

HOME ADDRESS

ROBERT E. DENNISON, D.M.D.
326-50-4738
PRESIDENT & C.E.O.

1208 HOLLINGSWOOD AVENUE
NAPERVILLE, IL 60565

MICHAEL LLOYD
233-04-0971
VICE PRESIDENT & C.F.O.

5885 FOREST VIEW DRIVE
LISLE, IL 60532

MICHAEL BERGER
330-40-6814
VICE PRESIDENT

1336 GAIL DRIVE
BUFFALO GROVE, IL 60089

HAZEL FISHER-GABLE
072-34-5489
SECRETARY

2145 NO. CLARK ST.
CHICAGO, IL

CALVIN C. AKAL, D.D.S.
354-24-7311
DIRECTOR

386 E. CRESCENT
ELMHURST, IL 60126

NORMAN DAHL
353-12-8279
DIRECTOR

4225 SARATOGA, APT. 401B
DOWNERS GROVE, IL 60515

GEORGE KEARNS
403-14-0328
DIRECTOR

725 N. MCKINLEY ROAD
LAKE FOREST, IL 60045

WILLIAM J. MONTANEZ
333-44-4329
DIRECTOR

517 VICTORIA LANE
OSWEGO, IL 60543

IRWIN ROBINSON
326-12-0961
DIRECTOR

1831 MISSION HILLS ROAD, APT. 107
NORTHBROOK, IL 60062

Attach.
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