

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G53677

FILED
Apr 17, 2006
Secretary of State

Entity Name: AESTHETIC DENTAL ARTS, INC.

Current Principal Place of Business:

% ROGER P. CONLEY
2401 MANATEE AVENUE WEST
BRADENTON, FL 342054933

New Principal Place of Business:

Current Mailing Address:

% ROGER P. CONLEY
2401 MANATEE AVENUE WEST
BRADENTON, FL 342054933

New Mailing Address:

FEI Number: 59-2343895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONLEY, ROGER P
2401 MANATEE AVENUE WEST
BRADENTON, FL 34205 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: D () Delete
Name: DALTON, PAUL V
Address: 1903 74TH ST. N.W.
City-St-Zip: BRADENTON, FL

Title: VD () Delete
Name: DALTON, PATRICIA C
Address: 1903 74TH ST. N.W.
City-St-Zip: BRADENTON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA C DALTON

VD

04/17/2006

Electronic Signature of Signing Officer or Director

Date