2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10217

Entity Name: M. PATRICK ARDOIN II, D.D.S., P.A.

FILED Feb 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% PROSTHODONTIC ASSOCIATES 3106 MANATEE AVE. WEST BRADENTON, FL 34205

Current Mailing Address: New Mailing Address:

% PROSTHODONTIC ASSOCIATES 3106 MANATEE AVE. WEST BRADENTON, FL 34205

FEI Number: 59-2431423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARDOIN, PATRICK M
3106 MANATEE AVE. WEST
BRADENTON, FL 33505 US

ARDOIN, PATRICK M
3106 MANATEE AVE. WEST
BRADENTON, FL 34205 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: 02/05/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 ARDOIN, MERVIN P.
 Name:
 ARDOIN, MERVIN P.

 Address:
 3106 MANATEE AVE W.
 Address:
 3106 MANATEE AVE W.

 City-St-Zip:
 BRADENTON, FL
 34205

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: MERVIN P. ARDOIN VP 02/05/2009