

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H43483

FILED
Jan 05, 2011
Secretary of State

Entity Name: WATSON'S DENTAL LABORATORY, INC.

Current Principal Place of Business:

% BARRY T. WATSON
3650 G. WEBBER STREET
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

% BARRY T. WATSON
3650 G. WEBBER STREET
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-2499621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, BARRY T.
3650 G. WEBBER STREET
SARASOTA, FL 34232 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

OFFICERS AND DIRECTORS:

Title: PSD
Name: WATSON, BARRY T.
Address: 7351 S. GATOR CREEK BLVD
City-St-Zip: SARASOTA FL,

Title: VTD
Name: WATSON, BARRY T.
Address: 7351 S GATOR CREEK BLVD
City-St-Zip: SARASOTA, FL

I hereby 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 all other like empowered.

SIGNATURE: BARRY WATSON

PRES

01/05/2011

Electronic Signature of Signing Officer or Director

Date