

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L01883

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: GENTLE DENTAL ORTHODONTICS, INC.

## Current Principal Place of Business:

1608 S. TUTTLE AVE.  
SARASOTA, FL 34239 US

## New Principal Place of Business:

## Current Mailing Address:

1528 S. TUTTLE AVE.  
SARASOTA, FL 34239 US

## New Mailing Address:

FEI Number: 65-0149312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREGORY, WILLIAM P.  
715 SWANN AVE.  
TAMPA FL, FL 33606 US

## Name and Address of New Registered Agent:

GREGORY, WILLIAM P.  
715 SWANN AVE.  
TAMPA, FL 33606 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: WILLIAM P. GREGORY

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BORCHERS, JOHN M.,  
Address: 6600 S GATOR CREEK BLVD  
City-St-Zip: SARASOTA, FL 34241

Title: P ( ) Delete  
Name: SAVICK, DEBORAH J  
Address: 6600 GATOR CREEK BLVD.  
City-St-Zip: SARASOTA, FL 34241

Title: SEC ( ) Delete  
Name: BORCHERS, MARY C  
Address: 6600 GATOR CREEK BLVD.  
City-St-Zip: SARASOTA, FL 34241

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JOHN M. BORCHERS

P

03/25/2009

Electronic Signature of Signing Officer or Director

Date