2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008326

FILED Feb 02, 2010 Secretary of State

Entity Name: CLAY COUNTY DENTAL CARE INC.

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

1414 KINGSLEY AVE, STE 2 1343 IDLEWOOD AVE

ORANGE PARK, FL 32073 GREEN COVE SPRINGS, FL 32043

Current Mailing Address: New Mailing Address:

1414 KINGSLEY AVE, STE 2 ORANGE PARK, FL 32073

FEI Number: 59-3688639 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:

KING, DAVID A ESQ KING, DAVID A ESQ 1414 KINGSLEY AVE, STE 2 1416 KINGSLEY AVE

ORANGE PARK, FL 32073 ORANGE PARK, FL 32073 US 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: 02/02/2010

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ARCHAMBAULT, GREGORY A D.M.D. Name: Address: 1414 KINGSLEY AVE, STE 2

City-St-Zip: ORANGE PARK, FL 32073

Title:

Name: HARRINGTON, JOHN J D.D.S. Address: 1584 KINGSLEY AVE. STE A City-St-Zip: ORANGE PARK, FL 32073

Title: DR

FIELDS, ROBERT P D.M.D. Name: Address: 421 KINGSLEY AVE, STE 301 City-St-Zip: ORANGE PARK, FL 32073

Title: DR

CIOFFI, GERALD A D.M.D. Name: Address: 767 BLANDING BLVD, STE 108

City-St-Zip: ORANGE PARK, FL 32065

Title: DR

Name: CAPUTA, LEWIS A D.M.D. 1409 KINGSLEY AVE, BLDG 5 Address: City-St-Zip: ORANGE PARK, FL 32073

Title:

HAESSNER, THEODORE A D.M.D. Name: Address: 1409 KINGSLEY AVE, BLDG 11 ORANGE PARK, FL 32073 City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREGORY A. ARCHAMBAULT, DMD DR. 02/02/2010

Electronic Signature of Signing Officer or Director

Date