

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005770

**FILED**  
**Feb 19, 2011**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA DENTAL HYGIENE ASSOCIATION, INC.

**Current Principal Place of Business:**

14818 BRECKNESS PLACE  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

8270 NW 182 STREET  
HIALEAH, FL 33015

**Current Mailing Address:**

14818 BRECKNESS PLACE  
MIAMI LAKES, FL 33016

**New Mailing Address:**

8270 NW 182 STREET  
HIALEAH, FL 33015

**FEI Number:** 36-4555153

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTOX, KAREN  
14807 BRECKNESS PLACE  
MIAMI LAKES, FL 33016 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: DP  
Name: JUAN, ELSY  
Address: 11212 S.W.33 CIRCLE PLACE  
City-St-Zip: MIAMI, FL 33165

Title: DT  
Name: HORNBERGER, NANNETTE  
Address: 8270 NW 185TH STREET  
City-St-Zip: HIALEAH, FL 33015

Title: BOD  
Name: MEADOR, BETTY L  
Address: 14818 BRECKNESS PLACE  
City-St-Zip: MIAMI LAKES, FL 33016

Title: BOD  
Name: IRENE, STAVROS  
Address: 4240 SW 60TH PLACE  
City-St-Zip: CORAL GABLES, FL 33155

Title: DS  
Name: RITA, SALGADO  
Address: 11505 S.W. 124 COURT  
City-St-Zip: MIAMI, FL 33186

Title: DVP  
Name: REBECCA, SMITH  
Address: 14453 S.W. 137 PLACE  
City-St-Zip: MIAMI, FL 33186

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: BETTY L. MEADOR

BOD

02/19/2011

Electronic Signature of Signing Officer or Director

Date