

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