

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004585

FILED
Jan 17, 2012
Secretary of State

Entity Name: DENTAL LIFELINE NETWORK - FLORIDA, INC.

Current Principal Place of Business:

1800 15TH STREET, SUITE 100
DENVER, CO 80202

New Principal Place of Business:

Current Mailing Address:

1800 15TH STREET, SUITE 100
DENVER, CO 80202

New Mailing Address:

FEI Number: 84-1533654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SABATES, CESAR DDS
747 PONCE DE LEON BLVD
CORAL GABLES, FL 33134 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: P
Name: SABATES, CESAR DDS
Address: 747 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: O
Name: EGGNATZ, MICHAEL
Address: 17190 PALM BLVD, SUITE 4
City-St-Zip: WESTON, FL 33326

Title: O
Name: BECKMAN, BILL
Address: 3260 BIRCH TERRACE
City-St-Zip: CORAL GABLES, FL 33134

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: CESAR SEBATES

PRES

01/17/2012

Electronic Signature of Signing Officer or Director

Date