2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N33528

Entity Name: THE GOLD COAST ACADEMY OF GENERAL DENTISTRY, INC.

Current Principal Place of Business:

% DR. ROBERT J. FISH
7737 N UNIVERSITY DR, S100
FT. LAUDERDALE, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

% DR. ROBERT J. FISH
7737 N UNIVERSITY DR, S100
FT. LAUDERDALE, FL 33321 US

New Mailing Address:

FEI Number: 65-0152101 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FISH, ROBERT J., (DR)
7737 N UNIVERSTIY DR 100
TAMARAC, FL 33321 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: D ( ) Delete
Name: SHEPHERD, PATRICK P
Address: 2860 S. SEACREST BLVD
City-St-Zip: BOYNTON BEACH, FL

Title: DP ( ) Delete
Name: FISH, ROBERT J.
Address: 7737 N UNIVERSITY DR, S100
City-St-Zip: FT. LAUDERDALE, FL

Title: D ( ) Delete
Name: GORDON, HARVEY P.
Address: 1051 N. 35TH AVE.
City-St-Zip: HOLLYWOOD, FL

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

SIGNATURE: PATRICK P. SHEPHERD D 04/30/2009

Electronic Signature of Signing Officer or Director — Date