

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001655

Entity Name: LITTLE SMILES, INC.

FILED
Apr 27, 2007
Secretary of State

Current Principal Place of Business:

13860 WELLINGTON TRACE STE 38-124
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

13860 WELLINGTON TRACE STE 38-124
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 65-0963754

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TASINI, OREN S
11780 US HWY ONE SUITE 300
NORTH PALM BEACH, FL 33408 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 () Delete
Name: ANDERSON, SCOTT C
Address: 107 SANDAL LANE, #2
City-St-Zip: PALM BEACH SHORES, FL 33404

Title: S () Delete
Name: TAVERNISE, BILL
Address: 12230 FOREST HILL BLVD STE 175
City-St-Zip: WELLINGTON, FL 33414

Title: T () Delete
Name: CURRAN, MATTHEW
Address: 408 4TH COURT
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: MORGAN, DAVE
Address: 2725 W FOXHALL DR
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP () Delete
Name: PARISI, JANIXX
Address: 15475 BELLANCA LN
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: GOUGH, RAY
Address: 4458 HUNTING TERRACE
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANDERSON, SCOTT C
Address: 13860 WELLINGTON TRACE STE 38-124
City-St-Zip: WELLINGTON, FL 33414

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PARISI, JANIXX
Address: 15475 BELLANCA LN
City-St-Zip: WELLINGTON, FL 33414

Title: D (X) Change () Addition
Name: SIMS, BEN
Address: 208 NORTH PARROTT AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

Title: D (X) Change () Addition
Name: FRALLICCIARDI, MIKE
Address: 5626 56TH WAY
City-St-Zip: WEST PALM BEACH, FL 33409

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: MIKE FRALLICCIARDI

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date