

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 14, 2002 8:00 am**  
**Secretary of State**

01-14-2002 90041 046 \*\*\*150.00

MACTEEN AVI

**DOCUMENT # P00000043686**

1. Entity Name  
**FIRST IMPRESSION DENTAL, INCORPORATED**

Principal Place of Business      Mailing Address  
**1525 S. BETTY LANE**                      **1525 S. BETTY LANE**  
**CLEARWATER FL 33756**                      **CLEARWATER FL 33756**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**14 S. Evergreen**                      **14 S. Evergreen**  
 Suite, Apt. #, etc.                      Suite, Apt. #, etc.

City & State      City & State  
**Clearwater FL**                      **Clearwater FL**

Zip      Country      Zip      Country  
**33756**      **Pinellas**      **33756**      **Pinellas**

4. FEI Number      Applied For  
**59-3650175**      Not Applicable

5. Certificate of Status Desired      **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**BOYCE, JOHN N**  
**1525 S. BETTY LANE**  
**CLEARWATER FL 33756**

7. Name and Address of New Registered Agent  
 Name **John Boyce**  
 Street Address (P.O. Box Number is Not Acceptable)  
**14 S. Evergreen**  
 City **Clearwater**      **FL**      Zip Code **33756**

8. 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      DATE **1-8-02**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS DUNN, DENNIS R 1525 S. BETTY LANE CLEARWATER FL 33756	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD BOYCE, JOHN N 1280 LAGOON RD TARPON SPRINGS FL 34689	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS Dunn Dennis 14 S. Evergreen Clearwater FL 33756	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD Boyce John 14 S. Evergreen Clearwater FL 33756	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:      DATE **1-8-02**      Daytime Phone # **777-442-4794**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)