

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000005950

FILED
Nov 08, 2007
Secretary of State**Entity Name:** WEST FLORIDA DENTAL, INC.**Current Principal Place of Business:**6601 NORTH DAVIS HIGHWAY
SUITE 8
PENSACOLA, FL 32504**New Principal Place of Business:****Current Mailing Address:**6601 NORTH DAVIS HIGHWAY
SUITE 8
PENSACOLA, FL 32504**New Mailing Address:****FEI Number:** 59-3691299**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FARRUSIA, VINCE
4025 CLAIBORNE
PENSACOLA, FL 32504 US**Name and Address of New Registered Agent:**FARRUGIA, ALAN
6601 NORTH DAVIS HIGHWAY
SUITE 8
PENSACOLA, FL 32504 US

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: AF

11/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARRUGIA, ALAN
Address: 119 LEGART DR
City-St-Zip: GULF BREEZE, FL 32561

Title: VP (X) Delete
Name: LAMBERT, CAROL
Address: 1633 KINSEGLE DR
City-St-Zip: GULF BREEZE, FL 32561

Title: S (X) Delete
Name: FARRUGIA, VINCE
Address: 6601 N DAVIS HWY
City-St-Zip: PENSACOLA, FL 32503

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

SIGNATURE: ALAN FARRUGIA

P

11/08/2007

Electronic Signature of Signing Officer or Director

Date