

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000012671

FILED
Jul 29, 2009
Secretary of State

Entity Name: WILLOW WALK FAMILY DENTISTRY, P.A.

Current Principal Place of Business:

175 N.W. 138TH TERRACE
SUITE 200
JONESVILLE, FL 32669

New Principal Place of Business:

13005 SW 1ST ROAD
SUITE 233
JONESVILLE, FL 32669

Current Mailing Address:

175 N.W. 138TH TERRACE
SUITE 200
JONESVILLE, FL 32669

New Mailing Address:

13005 SW 1ST ROAD
SUITE 233
JONESVILLE, FL 32669

FEI Number: 59-3691043

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAUG, CYNTHIA D
175 N.W. 138TH TERRACE
SUITE 200
JONESVILLE, FL 32669 US

Name and Address of New Registered Agent:

HAUG, CYNTHIA D
13005 SW 1ST ROAD
SUITE 233
JONESVILLE, FL 32669 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: CYNTHIA HAUG

07/29/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HAUG, CYNTHIA D DMD
Address: 175 N.W. 138TH TERRACE, SUITE 200
City-St-Zip: JONESVILLE, FL 32669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HAUG, CYNTHIA D DMD
Address: 13005 SW 1ST ROAD, STE 233
City-St-Zip: JONESVILLE, FL 32669

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: CYNTHIA HAUG

PRES

07/29/2009

Electronic Signature of Signing Officer or Director

Date