2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2002 8:00 AM
Secretary of State

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Entity Name: FOWLER DENTAL STUDIO, INC.

Current Principal Place of Business:

2011 8TH ST SW
DECATUR, AL 35601

New Principal Place of Business:

808 E. OCEAN BLVD.
SUITE B
STUART, FL 34994

Current Mailing Address:

2011 8TH ST SW
DECATUR, AL 35601

New Mailing Address:

808 E. OCEAN BLVD.
SUITE B
STUART, FL 34994

FEI Number: 65-1108032 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WOODS, WALTER G
310 SW OCEAN BLVD
STUART, FL 34994 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FOWLER, HARVEY J
Address: 2011 8TH ST SW
City-St-Zip: DECATUR, AL 35601

Title: D ( ) Delete
Name: FOWLER, TAWNYA M
Address: 2011 8TH ST SW
City-St-Zip: DECATUR, AL 35601

Title: D ( ) Delete
Name: CHAPMAN, JOYCE
Address: 2011 8TH ST SW
City-St-Zip: DECATUR, AL 35601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FOWLER, HARVEY J
Address: 10571 SW LANDS END PL.
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Change ( ) Addition
Name: FOWLER, TAWNYA M
Address: 10571 SW LANDS END PL
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Change ( ) Addition
Name: CHAPMAN, JOYCE E
Address: 1409 ALPINE ST., SE
City-St-Zip: DECATUR, AL 35603

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TAWNYA M. FOWLER D 04/25/2002

Electronic Signature of Signing Officer or Director — Date