

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000080864

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Entity Name:** HUFF DENTAL LABORATORY, INC.

**Current Principal Place of Business:**

209 ORANGE ST.  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

1942 BELCHER RD.  
DUNEDIN, FL 34698 US

**Current Mailing Address:**

209 ORANGE ST.  
PALM HARBOR, FL 34683 US

**New Mailing Address:**

1942 BELCHER RD.  
DUNEDIN, FL 34698 US

**FEI Number:** 59-3735915

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HUFF, ANTHONY P  
209 ORANGE ST.  
PALM HARBOR, FL 34683 US

**Name and Address of New Registered Agent:**

HUFF, ANTHONY P  
1942 BELCHER RD.  
DUNEDIN, FL 34698 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

01/12/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HUFF, ANTHONY P  
Address: 1942 BELCHER RD.  
City-St-Zip: DUNEDIN, FL 34698 US

I hereby 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 all other like empowered.

SIGNATURE: ANTHONY P. HUFF

PRES

01/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date