2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2011
Secretary of State

DOCUMENT# P02000030176

Entity Name: PRECISION SOUTH DENTAL CORP.

Current Principal Place of Business:

4828 N KINGS HWY
SUITE 502
FORT PIERCE, FL 34951

New Principal Place of Business:

4888 N KINGS HWY
SUITE 502
FORT PIERCE, FL 34951

Current Mailing Address:

4828 N KINGS HWY
SUITE 502
FORT PIERCE, FL 34951

New Mailing Address:

4888 N KINGS HWY
SUITE 502
FORT PIERCE, FL 34951

FEI Number: 04-3624907 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CATHERINE M. ZELLER
4828 N KINGS HWY
SUITE 502
FORT PIERCE, FL 34953 US

Name and Address of New Registered Agent:

ZELLNER, CATHERINE M
4888 N KINGS HWY
SUITE 502
FORT PIERCE, FL 34953 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: CATHERINE M. ZELLNER 04/04/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: ZELLER, CATHERINE M
Address: 4888 N KINGS HWY
City-St-Zip: FORT PIERCE, FL 34951

Title: VP
Name: ZELLNER, STEVEN C
Address: 4880 N KINGS HWY
City-St-Zip: FORT PIERCE, FL 34951

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: C ATHERINE M. ZELLNER P 04/04/2011
Electronic Signature of Signing Officer or Director Date