2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000052155

Entity Name: CORAL SPRINGS DENTAL CARE, P.A.

FILED Mar 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10220 W SAMPLE RD 10220 W SAMPLE RD

CORAL SPRINGS, FL CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

2235 N. COMMERCE PKWY, STE 1 10220 W SAMPLE ROAD WESTON, FL 33326 CORAL SPRINGS, FL 33065

FEI Number: 41-2042807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GILBERT, MARK B
2235 N COMMERCE PKWY STE 1
WESTON, FL 33326 US
GILBERT, MARK B
10220 W SAMPLE ROAD
CORAL SPRINGS, FL 33065 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: MARK B. GILBERT DMD 03/13/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST ()Delete Title: ()Change ()Addition

 Name:
 GILBERT, MARK B
 Name:

 Address:
 10220 W SAMPLE RD
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:

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: MARK B. GILBERT DMD PRES 03/13/2005