

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064205

**FILED**  
**Jan 25, 2007**  
**Secretary of State**

**Entity Name:** THE NEW PEDIATRIC DENTAL CARE OF GREATER ORLANDO, INC.

**Current Principal Place of Business:**

1759 W BROADWAY ST, STE 4  
OVIEDO, FL 32765

**New Principal Place of Business:**

11309 LAKE UNDERHILL ROAD  
SUITE 103  
ORLANDO, FL 32825

**Current Mailing Address:**

1759 W BROADWAY ST, STE 4  
OVIEDO, FL 32765

**New Mailing Address:**

3302 CORONET AVENUE  
ORLANDO, FL 32833

**FEI Number:** 03-0467831

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, LINCOLN B  
1759 W BROADWAY ST, STE 4  
OVIEDO, FL 32765 US

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

TAYLOR, LINCOLN B  
3302 CORONET AVENUE  
ORLANDO, FL 32825 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: LINCOLN BOYD TAYLOR

01/25/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DR ( ) Delete  
Name: TAYLOR, LINCOLN B  
Address: 1759 W BROADWAY ST, STE 4  
City-St-Zip: OVIEDO, FL 32765

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

Title: DR (X) Change ( ) Addition  
Name: TAYLOR, LINCOLN B  
Address: 11309 LAKE UNDERHILL ROAD SUITE 103  
City-St-Zip: ORLANDO, FL 32825 US

I hereby certify that the information supplied with this filing does not qualify for the 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: LINCOLN BOYD TAYLOR

DR

01/25/2007

Electronic Signature of Signing Officer or Director

Date