

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000068231

FILED
Mar 06, 2005
Secretary of State

Entity Name: DENTAL ARTS OF ST. LUCIE WEST, INC.

Current Principal Place of Business:

1420 ST. LUCIE WEST BLVD.
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

1420 ST. LUCIE WEST BLVD.
PORT SAINT LUCIE, FL 34986

New Mailing Address:

FEI Number: 11-3647247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAGER, ANDREW T
4504 WATER OAK CT.
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

LAGER, ANDREW T
3112 SW NEWBERRY COURT
PALM CITY, FL 34990 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: ANDREW T LAGER

03/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAGER, ANDREW T
Address: 4504 WATER OAK CT.
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S () Delete
Name: LAGER, YOUNG-SHIN
Address: 4504 WATER OAK CT.
City-St-Zip: PALM BEACH GARDENS, FL 33410

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAGER, ANDREW T
Address: 3112 SW NEWBERRY COURT
City-St-Zip: PALM CITY, FL 34990

Title: S (X) Change () Addition
Name: LAGER, YOUNG-SHIN
Address: 3112 SW NEWBERRY COURT
City-St-Zip: PALM CITY, FL 34990

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: SAMUEL G DAVIS

ACCT

03/06/2005

Electronic Signature of Signing Officer or Director

Date