

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008473

FILED
Aug 05, 2005
Secretary of State

Entity Name: HOLLIS DENTAL, INC.

Current Principal Place of Business:

755 SW STATE RD 47
SUITE A
LAKE CITY, FL 32025 US

New Principal Place of Business:

147 SALEM COURT
TALLAHASSEE, FL 32301 US

Current Mailing Address:

640 SE COUNTY RD 252
APT. 102
LAKE CITY, FL 32025 US

New Mailing Address:

1910 ALBAN AVENUE
TALLAHASSEE, FL 32301 US

FEI Number: 56-2319762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLIS, BRENDA L DMD
640 SE COUNTY RD 252
APT. 102
LAKE CITY, FL 32025 US

Name and Address of New Registered Agent:

HOLLIS, BRENDA L DMD
1910 ALBAN AVENUE
TALLAHASSEE, FL 32301 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: BRENDA L. HOLLIS

08/05/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DR. () Delete
Name: HOLLIS, BRENDA L DMD
Address: 640 SE COUNTY RD 252, APT. 102
City-St-Zip: LAKE CITY, FL 32025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change () Addition
Name: HOLLIS, BRENDA L DMD
Address: 1910 ALBAN AVENUE
City-St-Zip: TALLAHASSEE, FL 32301

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: BRENDA L. HOLLIS

DR.

08/05/2005

Electronic Signature of Signing Officer or Director

Date