

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033983

FILED
Sep 11, 2009
Secretary of State

Entity Name: WESTON FAMILY DENTAL CENTER, INC.

Current Principal Place of Business:

1350 S.W. 160TH AVE.
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

1350 S.W. 160TH AVE.
WESTON, FL 33326

New Mailing Address:

FEI Number: 05-0560957

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIFILIPPO, STEVEN
1350 SW 100TH AVE
WESTON, FL 33326 US

Name and Address of New Registered Agent:

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:

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: PT () Delete
Name: DIFILIPPO, STEVEN
Address: 18621 SW 44TH ST
City-St-Zip: MIRAMAR, FL 33029

Title: VS () Delete
Name: SEVEL, DENNIS
Address: 2445 PROVENCE CIRCLE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: STEVEN DIFILIPPO

PT

09/11/2009

Electronic Signature of Signing Officer or Director

Date