

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088303

FILED
Feb 01, 2007
Secretary of State

Entity Name: DENTAL TEMPS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

13891 IBIS POINT BLVD
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

13245 ATLANTIC BOULEVARD, SUITE 4-374
JACKSONVILLE, FL 322253127

New Mailing Address:

FEI Number: 56-2386008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANE, TERENCE G JR.
233 EAST BAY STREET
SUITE 620
JACKSONVILLE, FL 32202 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KNAPP, KIM E
Address: 13245 ATLANTIC BOULEVARD, SUITE 4-374
City-St-Zip: JACKSONVILLE, FL 322253127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: KIM E. KNAPP

PRES

02/01/2007

Electronic Signature of Signing Officer or Director

Date