

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091518

FILED
Jan 06, 2011
Secretary of State

Entity Name: ORAL SURGICAL INSTITUTE, P.A.

Current Principal Place of Business:

400 CELEBRATION PLACE
SUITE A-260
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

400 CELEBRATION PLACE
SUITE A-260
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 57-1186116

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARDEMAN, JOHN H
400 CELEBRATION PLACE
SUITE A-260
CELEBRATION, FL 34747 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

OFFICERS AND DIRECTORS:

Title: DR
Name: HARDEMAN, JOHN
Address: 400 CELEBRATION PLACE SUITE A-260
City-St-Zip: CELEBRATION, FL 34747

I hereby 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 all other like empowered.

SIGNATURE: JOHN H HARDEMAN MD, DDS

PRES

01/06/2011

Electronic Signature of Signing Officer or Director

Date