2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000040373

Entity Name: LAKE MARY ENDODONTICS, P.A.

FILED May 01, 2008 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

440 SAINT CHARLES CT STE 1000 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

1513 EDENHALL PT 440 SAINT CHARLES CT HEATHROW, FL 32746 STE 1000 LAKE MARY, FL 32746

FEI Number: 20-0862487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAISSIE, TRAVIS 1513 EDENHALL PT HEATHROW, FL 32746 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:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CAISSIE, TRAVIS E DDS CAISSIE, TRAVIS E DDS Name: Name: 1513 EDENHALL PT Address: 440 ST. CHARLES CT Address: City-St-Zip: HEATHROW, FL 32746 City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CAISSIE, LEE
 Name:
 CAISSIE, LEE

 Address:
 1513 EDENHALL PT
 Address:
 440 ST. CHARLES CT

 City-St-Zip:
 HEATHROW, FL 32746
 City-St-Zip:
 LAKE MARY, FL 32746

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: LEE CAISSIE D 05/01/2008