

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000081121

FILED
Mar 24, 2009
Secretary of State

Entity Name: SPRING HILL DENTURE LAB, INC.

Current Principal Place of Business:

13011 SPRING HILL DR
CYPRESS COURT
SPRING HILL, FL 34609

New Principal Place of Business:

4470 LANDOVER BLVD
SPRING HILL, FL 34609

Current Mailing Address:

13011 SPRING HILL DR
CYPRESS COURT
SPRING HILL, FL 34609

New Mailing Address:

4470 LANDOVER BLVD
SPRING HILL, FL 34609

FEI Number: 20-8635865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, PAUL
13011 SPRING HILL DR
CYPRESS COURT
SPRING HILL, FL 34609 US

Name and Address of New Registered Agent:

MURPHY, PAUL
4470 LANDOVER BLVD
SPRING HILL, FL 34609 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: PAUL MURPHY

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MURPHY, PAUL F
Address: 13011 SPRING HILL DR
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MURPHY, PAUL F
Address: 4470 LANDOVER BLVD
City-St-Zip: SPRING HILL, FL 34609

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: PAUL MURPHY

P

03/24/2009

Electronic Signature of Signing Officer or Director

Date