

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000134405

FILED
Aug 11, 2010
Secretary of State

Entity Name: DENTAL ARTS OF FLORIDA PA

Current Principal Place of Business:

7645 GATE PARKWAY
SUITE 103
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

10986 WOOD EDEN COURT
JACKSONVILLE, FL 32256

New Mailing Address:

7645 GATE PARKWAY
SUITE 103
JACKSONVILLE, FL 32256

FEI Number: 20-1664013

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURSONOFF, TIM
10986 WOOD EDEN COURT
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

TURSONOFF, TIM
7645 GATE PARKWAY
SUITE 103
JACKSONVILLE, FL 32256 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: TURSONOFF

08/11/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: TURSUNOV, ANGELLA G
Address: 10986 WOOD EDEN COURT
City-St-Zip: JACKSONVILLE, FL 32256

Title: COO
Name: TURSONOFF, TIM
Address: 10986 WOOD EDEN COURT
City-St-Zip: JACKSONVILLE, FL 32256

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: TIM TURSONOFF

COO

08/11/2010

Electronic Signature of Signing Officer or Director

Date