

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 28, 2010
Secretary of State

Entity Name: JOSLYN A. VANN, D.D.S, FAMILY, COSMETIC AND SPA DENTISTRY, INC.

Current Principal Place of Business:

5911 TIMUQUANA ROAD
SUITE 202
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

5911 TIMUQUANA ROAD
SUITE 202
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 20-1971337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VANN, JOSLYN A. DOCTOR
5911 TIMUQUANA ROAD
SUITE 202
JACKSONVILLE, FL 32210 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: DR.
Name: VANN, JOSLYN A. DOCTOR
Address: 5811 TIMUQUANA ROAD #202
City-St-Zip: JACKSONVILLE, FL 32210

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: JOSLYN A. VANN, D.D.S.

DR.

04/28/2010

Electronic Signature of Signing Officer or Director

Date