2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000048096

FILED Apr 17, 2007 Secretary of State

Entity Na	me: ENDODO	ONTIC ASSOCIATES OF TRINI	TY, P.A.			
Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:		
	RIAN TERRAC RBOR, FL 346			8812 HAWBUCK STREET TRINITY, FL 34655 US		
Current N	lailing Addres	ss:	New Mail	New Mailing Address:		
3540 FLORIAN TERRACE PALM HARBOR, FL 34685				8812 HAWBUCK STREET TRINITY, FL 34655 US		
FEI Number	: 20-1205326	FEI Number Applied For()	FEI Number Not App	olicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and	d Address of N	lew Registered Agent:	
	RAED S RIAN TERRAC RBOR, FL 346		3540 FLO	KASEM, KIMBERLY 3540 FLORIAN TERRACE PALM HARBOR, FL 33761 US		
	e named entity : e of Florida.	submits this statement for the p	urpose of changing	its registered o	ffice or registered agent, or both,	
SIGNATURE: KIMBERLY KASEM				04/17/2007		
OFFICER	S AND DIREC	nic Signature of Registered Age		NS/CHANGES	Date TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:) Delete S TERRACE	Title: Name: Address: City-St-Zip:) Change ()Addition DR K STREET	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	EVP () LAZARO, EDUA 8812 HAWBUC TRINITY, FL 3	K STREET	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	VP () HALLER, ROBE 8812 HAWBUC TRINITY, FL 34	K STREET	
Title: Name: Address: City-St-Zip:	()) Delete	Title: Name: Address: City-St-Zip:	SEC () KORN, HEIDI I 8812 HAWBUC TRINITY, FL 3	K STREET	
Title: Name: Address: City-St-Zip:) Delete	Title: Name: Address: City-St-Zip:	TREA () OYOLA, MARIN 8812 HAWBUC TRINITY, FL 34	K STREET	

I hereby certify that the information supplied with this filing does not qualify for the 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: KIMBERLY KASEM RΑ 04/17/2007