

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020884

FILED
Mar 17, 2011
Secretary of State

Entity Name: RIVERVIEW FAMILY DENTISTRY, P.A.

Current Principal Place of Business:

13039 SUMMERFIELD SQUARE DR
RIVERVIEW, FL 33578 US

New Principal Place of Business:

Current Mailing Address:

14722 HERONGLLEN DRIVE
LITHIA, FL 33547 US

New Mailing Address:

FEI Number: 20-4280833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEHGAL, RAJIVE
14722 HERONGLLEN DR
LITHIA, FL 33547 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

OFFICERS AND DIRECTORS:

Title: PST
Name: SEHGAL, MAMTA
Address: 14722 HERONGLLEN DR
City-St-Zip: LITHIA, FL 33547 US

Title: MGR
Name: SEHGAL, RAJIVE
Address: 14722 HERONGLLEN DR
City-St-Zip: LITHIA, FL 33547

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: RAJIVE SEHGAL

MGR

03/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date