

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000039908

FILED
Apr 06, 2011
Secretary of State

Entity Name: JACKSONVILLE SMILE CENTER, P.A.

Current Principal Place of Business:

14054 BEACH BLVD.
SUITE 10
JACKSONVILLE, FL 32250

New Principal Place of Business:

Current Mailing Address:

14054 BEACH BLVD.
SUITE 10
JACKSONVILLE, FL 32250

New Mailing Address:

FEI Number: 20-4525090

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARMUR, RAFAL T
13799 DEER CHASE PLACE
JACKSONVILLE, FL 32224 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: DMD
Name: MARMUR, RAFAL T
Address: 13799 DEER CHASE PLACE
City-St-Zip: JACKSONVILLE, FL 32224

Title: D
Name: MARMUR, BARBARA G
Address: 13799 DEER CHASE PLACE
City-St-Zip: JACKSONVILLE, FL 32224

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: BARBARA G. MARMUR

VP

04/06/2011

Electronic Signature of Signing Officer or Director

Date