2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000083456

Entity Name: TRINITY ENDODONTICS OF GREATER LAKELAND, P.A.

FILED Nov 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3123 WINDLASS COURT 607 SOUTH MISSOURI AVENUE TAMPA, FL 33607 US LAKELAND, FL 33815 US

Current Mailing Address: New Mailing Address:

3123 WINDLASS COURT 607 SOUTH MISSOURI AVENUE TAMPA, FL 33607 US LAKELAND, FL 33815 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CRAWFORD, TERRYL DR.
3123 WINDLASS COURT
TAMPA, FL 33607 US

CRAWFORD, TERRYL M DR.
607 SOUTH MISSOURI AVENUE
LAKELAND, FL 33815 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: TERRYL M. CRAWFORD 11/30/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 P,D
 () Delete

 Name:
 CRAWFORD, TERRYL DR.

 Address:
 3123 WINDLASS COURT

 City-St-Zip:
 TAMPA, FL 33607 US

 Title:
 S
 () Delete

 Name:
 COLON, RAMHELI

 Address:
 607 S MISSOURI AVENUE

 City-St-Zip:
 LAKELAND, FL 33815 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: CRAWFORD, TERRYL M DR.
Address: 607 SOUTH MISSOURI AVENUE
City-St-Zip: LAKELAND, FL 33815 US

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: RAMHELI COLON S 11/30/2007