

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000107496

FILED
Jan 25, 2010
Secretary of State

Entity Name: THE DENTAL HEALTH PROFESSIONALS AT VIERA, P.A.

Current Principal Place of Business:

5455 MURRELL ROAD
SUITE C
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

5455 MURRELL ROAD
SUITE 108
ROCKLEDGE, FL 32955 US

Current Mailing Address:

5455 MURRELL ROAD
SUITE C
ROCKLEDGE, FL 32955 US

New Mailing Address:

5455 MURRELL ROAD
SUITE 108
ROCKLEDGE, FL 32955 US

FEI Number: 20-5390000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROPPIA, JAMES D
5455 MURRELL ROAD
SUITE C
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

ROPPIA, JAMES D
5455 MURRELL ROAD
SUITE 108
ROCKLEDGE, FL 32955 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:

01/25/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: ROPPIA, JAMES D
Address: 5455 MURRELL ROAD, STE 108
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: VP
Name: ROPPIA, KARA H
Address: 5455 MURRELL ROAD, STE 108
City-St-Zip: ROCKLEDGE, FL 32955 US

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: JAMES D. ROPPIA

P

01/25/2010

Electronic Signature of Signing Officer or Director

Date