

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000013531

FILED  
Jan 28, 2010  
Secretary of State

**Entity Name:** HELIDONAS DENTISTRY, INC.

**Current Principal Place of Business:**

2314 WINSLOE DRIVE  
TRINITY, FL 34655

**New Principal Place of Business:**

7200 RIDGE ROAD  
STE 2  
PORT RICHEY, FL 34668

**Current Mailing Address:**

2314 WINSLOE DRIVE  
TRINITY, FL 34655

**New Mailing Address:**

**FEI Number:** 20-8347245

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HELIDONAS, IOANNIS  
2314 WINSLOE DRIVE  
TRINITY, FL 34655 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HELIDONAS, IOANNIS  
Address: 2314 WINSLOE DRIVE  
City-St-Zip: TRINITY, FL 34655

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: IOANNIS HELIDONAS

P

01/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date