2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2008
Secretary of State

DOCUMENT# P07000064247

Entity Name: STONEYBROOK FAMILY DENTISTRY, PA

Current Principal Place of Business:

1157 HAWKSLADE COURT
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

15502 STONEYBROOK WEST PKWY
SUITE 126
WINTER GARDEN, FL 34787 US

Current Mailing Address:

1157 HAWKSLADE COURT
WINTER GARDEN, FL 34787 US

New Mailing Address:

FEI Number: 26-0730038 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHOCHET, RANDALL M
6308 GRAND CYPRESS CIRCLE
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

WARDLAW, WENDI K DDS
1157 HAWKSLADE COURT
LAKE WORTH, FL 33463 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: WENDI K. WARDLAW 03/15/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P,D ( ) Delete
Name: JACKSON, ZITERIA H
Address: 1157 HAWKSLADE COURT
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change ( ) Addition
Name: WARDLAW, WENDI K DDS
Address: 1157 HAWKSLADE COURT
City-St-Zip: WINTER GARDEN, FL 34787

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: WENDI K. WARDLAW P,D 03/15/2008
Electronic Signature of Signing Officer or Director Date