2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2010
Secretary of State

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Entity Name: OAKLEAF FAMILY DENTISTRY, P.A.

Current Principal Place of Business:

909 ORIENTAL GARDEN ROAD
JACKSONVILLE, FL 32207

New Principal Place of Business:

909 ORIENTAL GARDENS ROAD
JACKSONVILLE, FL 32207

Current Mailing Address:

PO 37737
JACKSONVILLE, FL 32236

New Mailing Address:

FEI Number: 26-2762914 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEE, JOSEPH K
909 ORIENTAL GARDEN ROAD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

LEE, JOSEPH K
909 ORIENTAL GARDENS ROAD
JACKSONVILLE, FL 32207 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: JOSEPH LEE 04/08/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP
Name: LEE, JOSEPH K
Address: PO BOX 37737
City-St-Zip: JACKSONVILLE, FL 32236

Title: VPTS
Name: QUERIDO, JANE G
Address: PO BOX 37737
City-St-Zip: JACKSONVILLE, FL 32236

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: JOSEPH LEE DP 04/08/2010
Electronic Signature of Signing Officer or Director Date