

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000057763

FILED  
Jan 11, 2010  
Secretary of State

**Entity Name:** CORAL SPRINGS FAMILY DENTISTRY AT UNIVERSITY, PA

**Current Principal Place of Business:**

2123 N. UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

2123 N. UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

10800 AVENIDA DEL RIO  
DELRAY BEACH, FL 33446

**FEI Number:** 26-2796182

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEIN, ILYA DMD  
2123 N. UNIVERSITY DR  
CORAL SPRINGS, FL 33071 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: STEIN, ILYA DMD  
Address: 2123 N. UNIVERSITY DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

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:** ILYA STEIN

P

01/11/2010

Electronic Signature of Signing Officer or Director

Date