

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000092141

FILED
Feb 19, 2010
Secretary of State

Entity Name: NAPLES DENTAL CARE, P.A.

Current Principal Place of Business:

785 CENTRAL AVE.
NAPLES, FL 34102 US

New Principal Place of Business:

Current Mailing Address:

150 WINDWARD DRIVE
OSPREY, FL 34229 US

New Mailing Address:

FEI Number: 30-0588770

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNARD, M. RICHARD
150 WINDWARD DRIVE
OSPREY, FL 34229 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: KENNARD, M. RICHARD
Address: 150 WINDWARD DRIVE
City-St-Zip: OSPREY, FL 34229 US

Title: S, T
Name: KENNARD, M. RICHARD
Address: 150 WINDWARD DRIVE
City-St-Zip: OSPREY, FL 34229 US

Title: VP
Name: MILLER, G. CREED
Address: 602 YUCCA
City-St-Zip: NAPLES, FL 34102 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: M. RICHARD KENNARD

S,T

02/19/2010

Electronic Signature of Signing Officer or Director

Date