

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000011427

FILED
Apr 21, 2011
Secretary of State

Entity Name: DENTAL HEALTH SERVICES OF CITRUS PARK, P.A.

Current Principal Place of Business:

8637 CITRUS PARK DRIVE
TAMPA, FL 33625 US

New Principal Place of Business:

Current Mailing Address:

8637 CITRUS PARK DRIVE
TAMPA, FL 33625 US

New Mailing Address:

FEI Number: 59-3196506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, MICHAEL J D.D.S.
8637 CITRUS PARK DRIVE
TAMPA, FL 33625 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

OFFICERS AND DIRECTORS:

Title: PRES
Name: WALKER, MICHAEL J D.D.S.
Address: 12964 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618

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: MICHAEL J. WALKER, DDS

PRES

04/21/2011

Electronic Signature of Signing Officer or Director

Date