

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000079234

FILED
Feb 17, 2011
Secretary of State

Entity Name: HAILE PLANTATION FAMILY DENTAL CENTER, P.A.

Current Principal Place of Business:

5347 S.W. 91ST TERRACE
SUITE B
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

5347 S.W. 91ST TERRACE
SUITE B
GAINESVILLE, FL 32608

New Mailing Address:

FEI Number: 59-3278342

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BANFIELD, GARY W
5347 S.W. 91ST TERRACE
SUITE B
GAINESVILLE, FL 32608 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: PSTD
Name: BANFIELD, GARY W
Address: 1618 SW 108 ST
City-St-Zip: GAINESVILLE, FL 32607

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: GARY BANFIELD

PSTD

02/17/2011

Electronic Signature of Signing Officer or Director

Date