

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000090791

FILED
Oct 05, 2009
Secretary of State

Entity Name: CENTER FOR PREMIER DENTISTRY, INC.

Current Principal Place of Business:

5100 STATION WAY
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

5100 STATION WAY
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-0634333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVARY, JOHNSON S JR.
DUNLAP & MORAN, P.A.
1990 MAIN ST., STE. 700
SARASOTA, FL 34236 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: VPS () Delete
Name: SWARTZ, JASON J
Address: 827 GOLDEN POND COURT
City-St-Zip: SARASOTA, FL 34229 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SWARTZ, JASON J
Address: 827 GOLDEN POND COURT
City-St-Zip: SARASOTA, FL 34229 US

Title: VP () Change (X) Addition
Name: SWARTZ, JASON J
Address: 827 GOLDEN POND COURT
City-St-Zip: SARASOTA, FL 34229 US

Title: SEC () Change (X) Addition
Name: SWARTZ, JASON J
Address: 827 GOLDEN POND COURT
City-St-Zip: SARASOTA, FL 34229 US

Title: TREA () Change (X) Addition
Name: SWARTZ, JASON J
Address: 827 GOLDEN POND COURT
City-St-Zip: SARASOTA, FL 34229 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JASON J SWARTZ

PRES

10/05/2009

Electronic Signature of Signing Officer or Director

Date