## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P96000010029

Entity Name: VALLEY FORGE DENTAL OF FLORIDA, P.A.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1324 HIGHWAY A1A SATELLITE BEACH, FL 32937

Current Mailing Address: New Mailing Address:

%BRIGHT NOW! DENTAL, INC. 201 E. SANDPOINTE, SUITE 800 SANTA ANA, CA 92707

FEI Number: 59-3356849 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US

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:

Clastrania Circatura of Dogistarad Agant

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/P ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 KANE, DONALD L
 Name:
 KANE, DONALD

 Address:
 1770 N WICKHAM ROAD
 Address:
 1324 HIGHWAY A1A

City-St-Zip: MELBOURNE, FL 32936 City-St-Zip: SATELLITE BEACH, FL 32937

 $\begin{tabular}{lll} Title: & S/T & (\ ) Delete & Title: & S & (X) Change (\ ) Addition \\ \end{tabular}$ 

Name: TUMBARELLO, STEVE Name: TUMBARELLO, STEVE

Address: 201 E. SANDPOINTE, SUITE 800 Address: 201 E. SANDPOINTE, SUITE 800

City-St-Zip: SANTA ANA, CA 92707 City-St-Zip: SANTA ANA, CA 92707

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: DONALD KANE D 04/30/2008