2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008
Secretary of State

DOCUMENT# P96000040134

Entity Name: CASTLE 1ST DENTAL CARE, P.A.

Current Principal Place of Business:

324 EAST LAKE RD
PALM HARBOR, FL 34685

New Principal Place of Business:

Current Mailing Address:

201 E. SANDPOINTE, SUITE 800
SANTA ANA, CA 92707

New Mailing Address:

FEI Number: 65-0665173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 (X) Delete
Name: SINGER, JOHN R DDS
Address: 324 EAST LAKE RD
City-St-Zip: PALM HARBOR, FL 34685

Title: D (X) Delete
Name: SINGER, JOHN R DDS
Address: 324 EAST LAKE RD.
City-St-Zip: PALM HARBOR, FL 34685

Title: S ( ) Delete
Name: TUMBARELLO, STEVE
Address: 201 E. SANDPOINTE, SUITE 800
City-St-Zip: SANTA ANA, CA 92707

Title: T (X) Delete
Name: TUMBARELLO, STEVE
Address: 201 E. SANDPOINTE, SUITE 800
City-St-Zip: SANTA ANA, CA 92707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: TUMBARELLO, STEVE
Address: 201 E. SANDPOINTE, SUITE 800
City-St-Zip: SANTA ANA, CA 92707

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: STEVE TUMBARELLO VP 04/10/2008

Electronic Signature of Signing Officer or Director — Date