

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000003692

FILED
Jan 17, 2011
Secretary of State

Entity Name: DENTAL HEALTH GROUP, P.A.

Current Principal Place of Business:

300 E LONG LAKE RD
STE 311
BLOOMFIELD HILLS, MI 48304 US

New Principal Place of Business:

Current Mailing Address:

300 E LONG LAKE RD
STE 311
BLOOMFIELD HILLS, MI 48304 US

New Mailing Address:

FEI Number: 65-0719035

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 RD
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

OFFICERS AND DIRECTORS:

Title: PD
Name: BRODY, ROBERT
Address: 300 EAST LONG LAKE RD, SUITE 311
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: CFO
Name: NODLAND, GREGORY C
Address: 300 EAST LONG LAKE RD, SUITE 311
City-St-Zip: BLOOMFIELD HILLS, MI 48304

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: GREGORY NODLAND

CFO

01/17/2011

Electronic Signature of Signing Officer or Director

Date