

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000096246

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: DENTAL CARE ALLIANCE OF PENNSYLVANIA, INC.

Current Principal Place of Business:

1 S. SCHOOL AVENUE
SUITE 1000
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

1 S. SCHOOL AVENUE
SUITE 1000
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 65-0876512

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, DAVID
1343 MAIN ST., 7TH FLOOR
SARASOTA, FL 34236

Name and Address of New Registered Agent:

NICHOLS, DAVID
1 S. SCHOOL AVE, STE 1000
SARASOTA, FL 34237

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: DAVID NICHOLS

04/26/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATZKIN, STEVEN R
Address: 1343 MAIN ST., 7TH FLOOR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: OLAN, MITCHELL
Address: 1343 MAIN ST., 7TH FLOOR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: SMITH, CURTIS LEE
Address: 1343 MAIN ST., 7TH FLOOR
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: RAUCCI, ROBERT
Address: 1343 MAIN ST., 7TH FLOOR
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MATZKIN, STEVEN R
Address: 1 S. SCHOOL AVE, STE 1000
City-St-Zip: SARASOTA, FL 34237

Title: D (X) Change () Addition
Name: OLAN, MITCHELL
Address: 1 S. SCHOOL AVE, STE 1000
City-St-Zip: SARASOTA, FL 34237

Title: D (X) Change () Addition
Name: SMITH, CURTIS LEE
Address: 1 S. SCHOOL AVE, STE 1000
City-St-Zip: SARASOTA, FL 34237

Title: D (X) Change () Addition
Name: RAUCCI, ROBERT
Address: 1 S. SCHOOL AVE, STE 1000
City-St-Zip: SARASOTA, FL 34237

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN MATZKIN

D

04/26/2002

Electronic Signature of Signing Officer or Director

Date