## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000101002

Entity Name: HIGHLAND LAKES DENTAL, PA

FILED Mar 28, 2012 Secretary of State

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

26540 ACE AVE 49 SAN CARLOS DR SUITE G PALM COAST, FL 32137

LEESBURG, FL 34748

Current Mailing Address: New Mailing Address:

26540 ACE AVE 49 SAN CARLOS DR SUITE G PALM COAST, FL 32137 LEESBURG, FL 34748

FEI Number: 59-3543176 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:

SMITH, LEON
3333 N HWY 27 /441
FRUITLAND PARK, FL 34731
US
SMITH, LEON
49 SAN CARLOS DR
PALM COAST, FL 32137
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: LEON SMITH 03/28/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

 Name:
 SMITH, LEON F

 Address:
 49 SAN CARLOS DR

 City-St-Zip:
 PALM COAST, FL 32137

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: LEON SMITH P 03/28/2012