2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# P99000015703

Entity Name: FAMILY DENTAL, INC.

Current Principal Place of Business:

C/O SCOTT L MCCLURE
4708 26TH ST WEST
BRADENTON, FL 34207

New Principal Place of Business:

Current Mailing Address:

C/O SCOTT L MCCLURE
4708 26TH ST WEST
BRADENTON, FL 34207

New Mailing Address:

FEI Number: 65-0840273 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCCLURE, SCOTT L DDS
4708 26TH ST WEST
BRADENTON, FL 34207 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: DDS ( ) Delete
Name: MCCLURE, SCOTT
Address: 4708 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DDS (X) Change ( ) Addition
Name: MCCLURE, SCOTT L
Address: 4708 26TH STREET WEST
City-St-Zip: BRADENTON, FL 34207

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: SCOTT L. MCCLURE DDS DDS 04/14/2009
Electronic Signature of Signing Officer or Director Date