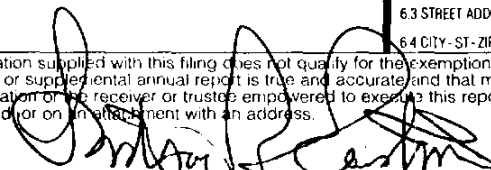


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S09775 (5) 1. Corporation Name DENTAL OFFICE PROPERTIES, INC.			
Principal Place of Business 703 DEL WEBB BLVD. SUN CITY CENTER FL 33573-5258		Mailing Address 703 DEL WEBB BLVD. SUN CITY CENTER FL 33573-5258	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent HENDRICKSON, ROBERT W., III 1201 6TH AVE. WEST SUITE 400 BRADENTON FL 34205			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP D EASTMAN, LINDSAY B. 1906 G 59TH ST. WEST BRADENTON FL DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP D TOMEI, CHARLES A. 1906 D 59TH ST. WEST BRADENTON FL DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP D THOMPSON, WILLIAM J. 4008 9TH AVE. WEST BRADENTON FL DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP DELETE TITLE NAME STREET ADDRESS CITY - ST - ZIP DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or its receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/31/1990	
4. FEI Number 65-0233361	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No	

CR2E034 (10/97)

6-1-98
Date

Daytime Phone # 0367483