

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000092408

FILED
Jan 12, 2009
Secretary of State

Entity Name: SHAMROCK DENTAL FRANCHISES, INC.

Current Principal Place of Business:

1490 PASADENA AVENUE S.
SOUTH PASADENA, FL 33707

New Principal Place of Business:

Current Mailing Address:

1490 PASADENA AVENUE S.
SOUTH PASADENA, FL 33707

New Mailing Address:

FEI Number: 54-2078308

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRINKLEY, LINSTER ESQ
2350-N 34TH STREET SUITE 110
ST PETERSBURG, FL 33713 US

Name and Address of New Registered Agent:

BRINKLEY, LINSTER ESQ
111 SECOND AVE. N.E.
#900
ST PETERSBURG, FL 33701 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: _____

Electronic Signature of Registered Agent

01/12/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: POLL () Delete
Name: POLLOCK, ALBERT B
Address: P.O. BOX 36003
City-St-Zip: PETE BEACH, FL 337363603

Title: P () Delete
Name: POLLOCK, STEVEN
Address: 1490 PASADENA AVE S.
City-St-Zip: SOUTH PASADENA, FL 33707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: POLL (X) Change () Addition
Name: POLLOCK, STEVE V
Address: 1490 PASADENA AVE. S.
City-St-Zip: SOUTH PASADENA, FL 33707

Title: P (X) Change () Addition
Name: POLLOCK, ALBERT B
Address: 1490 PASADENA AVE S.
City-St-Zip: SOUTH PASADENA, FL 33707

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: STEVE POLLOCK

Electronic Signature of Signing Officer or Director

PRES

01/12/2009

Date