

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711747

Entity Name: CENTRAL DISTRICT DENTAL ASSOCIATION, INC.**Current Principal Place of Business:**800 N MILLS AVE
ORLANDO, FL 32803**Current Mailing Address:**800 N MILLS AVE
ORLANDO, FL 32803 US**FEI Number:** 59-6196823**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FULTON, MARLINDA D
800 N MILLS AVE
ORLANDO, FL 32803 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:** MARLINDA D FULTON

01/05/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	RAWAL, SUNDEEP
Address	2180 N. COURTENAY PKWY.
City-State-Zip:	MERRITT ISLAND FL 32953

Title	PRESIDENT
Name	KEOUGH, LEE ANNE
Address	2701 SW 34TH ST.
City-State-Zip:	OCALA FL 34474

Title	PAST PRESIDENT
Name	SEVOR, JEFFREY
Address	2295 LEE ROAD
City-State-Zip:	WINTER PARK FL 32789

Title	VP
Name	BERGENS, BRYAN
Address	724 S. BEACH ST.
City-State-Zip:	DAYTONA BEACH FL 32114

Title	VP
Name	CROFTON, DANIEL
Address	2075 PINE BLUFF PLACE
City-State-Zip:	OVIEDO FL 32765

Title	EXECUTIVE SECRETARY
Name	FULTON, MARLINDA
Address	800 N. MILLS AVE.
City-State-Zip:	ORLANDO FL 32803

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARLINDA FULTON**EXECUTIVE DIRECTOR**

01/05/2017

Electronic Signature of Signing Officer/Director Detail

Date