

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000012107

Entity Name: DENTAL OUTREACH OF COLLIER, INC.

Current Principal Place of Business:

2375 TAMIAMI TRAIL NORTH SUITE 110
NAPLES, FL 34103

Current Mailing Address:

2375 TAMIAMI TRAIL NORTH SUITE 110
NAPLES, FL 34103

FEI Number: 27-1546428

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'SULLIVAN, DAVID JDMD
987 HIGH POINT DR
NAPLES, FL 34103 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

Date

Officer/Director Detail :

Title	PRES	Title	VP
Name	O'SULLIVAN, DAVID J	Name	CRANDALL, JAMES J
Address	987 HIGH POINT DRIVE	Address	27499 RIVERVIEW CENTER BLVD #127
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	BONITA SPRINGS FL 34134
Title	SEC	Title	TREA
Name	CULLINAN, LEO R	Name	GUSTASON, RONALD W
Address	4933 TAMIAMI TRAIL NO	Address	2375 TAMIAMI TRAIL NO STE 110
City-State-Zip:	NAPLES FL 34103	City-State-Zip:	NAPLES FL 34103

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: RONALD GUSTASON

TREASURER

01/16/2015

Electronic Signature of Signing Officer/Director Detail

Date