2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003307

Entity Name: GROUP DENTAL SERVICE, INC.

Current Principal Place of Business:

6720B ROCKLEDGE DRIVE, SUITE 700

BETHESDA, MD 20817

Current Mailing Address:

151 FARMINGTON AVENUE

RW61

HARTFORD, CT 06156 US

FEI Number: 52-1801446 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Apr 09, 2016

Secretary of State

CC1770821402

Officer/Director Detail:

 Title
 DIRECTOR
 Title
 VP, TREASURER, DIRECTOR

 Name
 HODGE, JOEL DAVID
 Name
 COFRANCESCO, ELAINE ROSE

Address 6720B ROCKLEDGE DRIVE, SUITE 700 Address 6720B ROCKLEDGE DRIVE, SUITE 700

City-State-Zip: BETHESDA MD 20817 City-State-Zip: BETHESDA MD 20817

Title DIRECTOR Title VP, DIRECTOR

Name MARTINO, GREGORY STEPHEN Name BELLIZZI, JERRY JOHN

Address 6720B ROCKLEDGE DRIVE, SUITE 700 Address 6720B ROCKLEDGE DRIVE, SUITE 700

City-State-Zip: BETHESDA MD 20817 City-State-Zip: BETHESDA MD 20817

Title PRESIDENT, DIRECTOR Title VP, SECRETARY

Name SMITH, TAMEEKA LASHELL Name LEE, EDWARD CHUNG-I

Address 6720B ROCKLEDGE DRIVE, SUITE 700 Address 151 FARMINGTON AVENUE

RW61

City-State-Zip: BETHESDA MD 20817 City-State-Zip: HARTFORD CT 06156

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

SIGNATURE: EDWARD CHUNG-I LEE

SECRETARY

04/09/2016