

FORM PTO-1594
(Rev. 6-93)

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

OMB No. 0651-0011 (exp. 4/94)

Atty Docket No. 49316.292350

To the Assistant Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
INFOCURE CORPORATION

- Individuals(s)
- General Partnership
- Corporation - State of **DELAWARE**
- Other _____

Additional names(s) of conveying party(ies) attached Yes No

2. Name and address of receiving party(ies)
Name: **PRACTICEWORKS SYSTEMS, LLC**

Internal Address: **STE 450**

Street Address: **1765 THE EXCHANGE SE**

City: **ATLANTA** State: **GEORGIA** Zip: **30339**

- Individual(s) citizenship _____
- Association _____
- General Partnership _____
- Limited Partnership _____
- Corporation-State _____
- Other **LIMITED LIABILITY CORPORATION - GEORGIA**

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No

Additional names(s) & address(es) attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

Execution Date: **5th day of March 2001**

4. Application numbers(s) or patent numbers(s):

A. Trademark Application No.(s)

B. Trademark Registration No.(s)

1,529,414
2,240,346

Additional numbers attached? Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: **William H. Brewster**

Internal Address: **Kilpatrick Stockton LLP**

Suite 2800

Street Address: **1100 Peachtree St.**

City: **Atlanta** State: **GA** Zip: **30309**

6. Total number of applications and registrations involved: **2**

7. Total fee (37 CFR 3.41).....\$ **65.00**

Enclosed

Authorized to be charged to deposit account

The Commissioner is authorized to charge any deficiency in the required fee or credit any over payment to Deposit Account No. 11-0860.

8. Deposit account number:

11-0860

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Lise Shettler

Name of Person Signing

Lise Shettler
Signature

Sept 17, 2003
Date

Total number of pages including cover sheet, attachments, and document: **4**

CH \$65.00 110860 1529414

ASSIGNMENT OF TRADEMARKS

WHEREAS, InfoCure Corporation, a Delaware corporation ("Assignor"), is the owner of the trademarks and registrations thereof in the United States Patent and Trademark Office listed on the attached Exhibit A.

WHEREAS, PracticeWorks Systems, LLC, a Georgia limited liability corporation ("Assignee"), is desirous of acquiring the entire right, title, and interest in said trademarks and registrations.

NOW, THEREFORE, in consideration for good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Assignor hereby sells, assigns, and transfers to Assignee the entire right, title and interest in and to said trademarks and registrations thereof, including the right to sue for damages and other remedies in respect of any infringement of the trademarks which may have occurred before the date of this assignment, together with the goodwill of the business symbolized by said trademarks and registrations.

Signed this 5th day of March, 2001

InfoCure Corporation,
a Delaware corporation

By: [Signature]
Title: FREDERICK L. FINE
PRESIDENT

STATE OF Georgia)
Fulton COUNTY)

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that Frederick L. Fine whose name as President of InfoCure Corporation, a Delaware corporation, is signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of this instrument, he as such officer, and with full authority, executed the same voluntarily for and as the act of said corporation.

Given under my hand and seal of office this 5th day of March, 2001.

[Signature]
Notary Public
My commission expires: _____

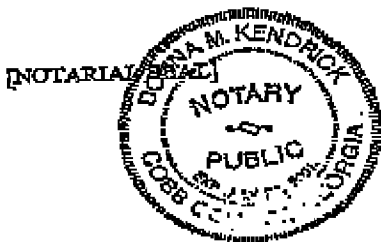


EXHIBIT ARegistered Trademarks

<u>Trademark</u>	<u>Reg. Number</u>	<u>Date</u>
ROYAK (Supplemental)	1,950,507	07/20/96
ROYAK (Principal)	2,009,950	10/22/96
POWERPRACTICE	1,954,126	11/07/95
WINOMS	1,947,961	01/16/96
WINMED	2,018,074	11/19/96
MICRO-DESIGNS SOFTWARE CORPORATION (design)	2,005,786	10/08/96
DENTALED	2,017,261	11/19/96
DENTALMAC	1,382,092	02/11/86
PRACTICEWORKS	1,900,446	06/02/95
INTELLIDENT	2,240,346	04/20/99
PRACTICE OUTLOOK	1,536,188	06/24/96
TRIDENT	Application filed with USPTO Serial Number: 75111911	05/30/96
CLINIDENT	Application filed with USPTO Serial Number: 75520528	07/17/98
TRIMEDIC	2023363 (U.K.)	06/08/95
TRINAVY	2023402 (U.K.)	06/08/95
TRIDENT	2023309 (U.K.)	06/08/95

B. Common Law Trademarks

~~Oral Surgery (OMS)~~
~~OMS~~
~~Orthoworks/PCM~~
~~Rovak Voice~~
~~Rovak General Ledger~~
~~KC-2000~~
~~KC-95~~
~~Dental Wizard~~

- ~~MDPM~~
- ~~OPMS for DCS~~
- ~~Class-1~~
- Orthoware $\rightarrow 1,529,414$
- ~~Alpha Health Care~~
- ~~CAW~~
- ~~Cobb for Ends~~
- ~~Cobb for Oral Surgeons~~
- ~~Cobb for Perio~~
- ~~Cobb for Windows~~
- ~~Cobb for Windows/Enterprise Edition~~
- ~~Cobb for Speedy Bill~~
- ~~Contact Wizard~~
- ~~DBS~~
- ~~Dental Business System~~
- ~~Office Wizard~~
- ~~Treatment Entry Wizard~~
- ~~UnidentX~~
- ~~www.cobbdental.com~~
- ~~Dental Corporate Office System~~
- ~~DCOS~~



Attorneys at Law

Suite 2800 1100 Peachtree St.
Atlanta GA 30309-4530
t 404 815 6500 f 404 815 6555
www.KilpatrickStockton.com

September 17, 2003

direct dial 404 815 6543
lshettler@KilpatrickStockton.com

FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
Assignment Division U.S. Patent and Trademark Office	703-306-5995	Assistant Commissioner for Trademarks

Lise Shettler, Paralegal

FROM

5

PAGES (WITH COVER)

8296

REFERENCE NO

49316.276300

CLIENT/MATTER NO.

PLEASE CALL 404 815 6497 IF YOU HAVE DIFFICULTY WITH THIS TRANSMISSION.

CONFIDENTIALITY NOTE:

The information contained in this fax message is being transmitted to and is intended for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copy of this fax is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and destroy this fax message.

COMMENTS

TO BE COMPLETED BY KS OPERATIONS CENTER

TRANSMISSION RECEIPT DATE/TIME: _____

COMPLETED BY: _____

JOB CODE _____

TRADEMARK**RECORDED: 09/17/2003****REEL: 002718 FRAME: 0013**