

BEFORE THE GEORGIA STATE BOARD OF

PROFESSIONAL LICENSING BOARDS

NOV 06 2007

DOCKET NO. 2007-2260

IN THE MATTER OF:

MARK DRAVIS

Respondent

**VOLUNTARY CEASE AND DESIST ORDER**

Respondent, who resides at / who operates his / her business at MARK DRAVIS, D.D.S.F.  
4842 Champions Way Columbus Ga 31909, currently does not possess a license to  
practice as a (an): DENTIST in the State of Georgia,  
pursuant to the Official Code of Georgia Annotated (O.C.G.A.), Title 43, Chapter 11-1, as amended.  
Potential violations of this part of O.C.G.A. have been called to Respondent's attention. Respondent  
has consented to this Order and agrees to voluntarily cease and desist from any act or practice that  
requires licensure under Title 43, Chapter 11-1, O.C.G.A., as amended, until such time as Respondent  
becomes properly licensed by the Board.

Respondent freely, knowingly and voluntarily waives the right to a hearing in this matter.  
Respondent understands that, should Respondent apply for licensure with the Board, the Board has  
access to this Order and the entire investigative file in this matter.

This order is effective upon approval by: THE GEORGIA STATE BOARD OF  
DENTISTRY and docketing with the Division Director,  
Professional Licensing Boards. The Order shall remain in effect until such time as Respondent  
is properly licensed with the Board, or until further order. Respondent understands this order  
is a public record and evidence of the final disposition of any proceedings presently before the Board.

Any violation of this Cease and Desist Order shall subject Respondent to a fine of \$ 500 .00  
for each transaction constituting a violation thereof, pursuant to O.C.G.A. § 43-1-20.1.

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EXHIBIT #  
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Katherine R. Albright

Name of Agent serving document

9/27/07

Date document served

CONSENTED TO:

[Signature]

SIGNATURE OF RESPONDENT

Sworn to and subscribed before me, this 27<sup>th</sup> day of Sept 20 07.

Katherine R. Albright

NOTARY PUBLIC

My commission expires:

6/7/10



APPROVED BY:

Clyde Andrews DDS  
W/expressed permission  
by Al Martin

CHAIRPERSON

ATTESTED TO:

[Signature]  
Donald Munday  
DIVISION DIRECTOR