

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717996

Entity Name: FLORIDA ASSOCIATION OF PERIODONTISTS, INC.

Current Principal Place of Business:

34049 WOODLAND CIRCLE
RIDGE MANOR, FL 33523

Current Mailing Address:

34049 WOODLAND CIRCLE
RIDGE MANOR, FL 33523 US

FEI Number: 23-7264533

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FULTON, MARLINDA
34049 WOODLAND CIRCLE
RIDGE MANOR, FL 33523 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 PRESIDENT
Name TERRY, BEATRIZ
Address 7755 SW 87TH AVE. #110
City-State-Zip: MIAMI FL 33173

Title TREASURER
Name CHURNEY, ROBERT DR.
Address 28469 US HWY. 19 N. #401
City-State-Zip: CLEARWATER FL 33761

Title EXECUTIVE SECRETARY
Name FULTON, MARLINDA
Address 34049 WOODLAND CIRCLE
City-State-Zip: RIDGE MANOR FL 33523

Title VP
Name ABDONEY, MARK DR
Address 2714 W. AZEELE ST.
City-State-Zip: TAMPA FL 33609

Title OFFICER
Name MOREJON, OSCAR DR
Address 815 N. NOVA RD.
City-State-Zip: DAYTONA BEACH FL 32117

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

01/16/2014

Electronic Signature of Signing Officer/Director Detail

Date