

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F62838

**Entity Name:** TERRY GLENN MAX, D.D.S., P.A.

**Current Principal Place of Business:**

C/O TERRY GLENN MAX  
5455 NORTH FEDERAL HIGHWAY, SUITE C  
BOCA RATON, FL 33487-4994

**Current Mailing Address:**

C/O TERRY GLENN MAX  
5455 NORTH FEDERAL HIGHWAY, SUITE C  
BOCA RATON, FL 33487-4994 US

**FEI Number:** 59-2161801

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MAX, TERRY GDDS  
5455 NORTH FEDERAL HIGHWAY, SUITE C  
BOCA RATON, FL 33487 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 PSTD  
Name MAX, TERRY GDDS  
Address 5455 N. FEDERAL HWY, C  
City-State-Zip: BOCA RATON FL 33487

*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:** TERRY G MAX DDS

PRESIDENT/OWNER

01/23/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date