## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95232

Entity Name: CHILDREN'S DENTISTRY, P.A.

**Current Principal Place of Business:** 

200 VILLAGE SQUARE XING SUITE E101

PALM BEACH GARDENS, FL 33410

**Current Mailing Address:** 

200 VILLAGE SQUARE XING SUITE E101

PALM BEACH GARDENS, FL 33410 US

FEI Number: 65-0123520 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENDECK, OSCAR R 5839 WHIRLAWAY RD PALM BEACH GARDENS, FL 33418 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 Jan 15, 2018

**Secretary of State** 

CC0072794103

Officer/Director Detail:

Title VSTD Title PD

Name BENDECK, OSCAR R Name MIRNA, BENDECK

Address 200 VILLAGE SQUARE CROSSING, Address 200 VILLAGE SQUARE CROSSING,

STE 101 STE 101

City-State-Zip: PALM BEACH GDNS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR Title DIRECTOR

Name BENDECK, HEIDI MARIE Name CORLETO, STEPHANIE

Address 1040 SANCTUARY COVE Address 262 IRIS DR.

City-State-Zip: NORTH PALM BEACH FL 33410 City-State-Zip: JUPITER FL 33458

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: OSCAR R BENDECK

**SECRETARY** 

01/15/2018