

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000064750

Entity Name: PARK AVENUE DENTAL, P.A.

Current Principal Place of Business:

912 NW 56 TERRACE
SUITE B
GAINESVILLE, FL 32605

Current Mailing Address:

912 NW 56 TERRACE
SUITE B
GAINESVILLE, FL 32605

FEI Number: 80-0212548

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOSLINGA, CODY S
14278 NW 31 AVE
SUITE B
GAINESVILLE, FL 32606 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	P/D	Title	S/D
Name	GOSLINGA, SHANE N	Name	GOSLINGA, CODY S
Address	12951 SW 5TH PLACE	Address	14278 NW 31 AVE
City-State-Zip:	NEWBERRY FL 32669	City-State-Zip:	GAINESVILLE FL 32606

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: SHANE GOSLINGA

OWNER

04/22/2013

Electronic Signature of Signing Officer/Director Detail

Date