

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000056240

**Entity Name:** HARVEY R. EBER, D.D.S., P.A.

**Current Principal Place of Business:**

3667 CROWN POINT ROAD  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

5150 BELFORT ROAD, BLDG. 100  
JACKSONVILLE, FL 32256 US

**FEI Number:** 59-3196009

**Certificate of Status Desired:** No

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

ANSBACHER & SCHNEIDER PA  
5150 BELFORT RD. BLDG #100  
JACKSONVILLE, FL 32256 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 DP  
Name EBER, HARVEY DR  
Address 3667 CROWN POINT RD.  
City-State-Zip: JACKSONVILLE FL 32257

*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:** DR. HARVEY EBER

**PRESIDENT**

**03/25/2020**

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

\_\_\_\_\_  
Date