# 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000095963

## Entity Name: BROWARD COUNTY DENTAL SURGERY, P.A.

### **Current Principal Place of Business:**

5181 N.E. 19TH AVENUE FT. LAUDERDALE, FL 33308

## **Current Mailing Address:**

5181 N.E. 19TH AVENUE FT. LAUDERDALE, FL 33308

# FEI Number: 65-0632683

## Name and Address of Current Registered Agent:

CLARKE, JOHN R 5181 N.E. 19TH AVENUE FT. LAUDERDALE, FL 33308 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

### Officer/Director Detail :

TitlePSTNameCLARKE, JOHN RAddress5181 N.E. 19TH AVENUECity-State-Zip:FT. LAUDERDALE FL 33308

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: JOHN R CLARKE

PRESIDENT

04/09/2015 Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 09, 2015 Secretary of State CC3801793789

Certificate of Status Desired: No

Date