

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000047011

Entity Name: MARC V. CAUCHON, D.M.D., P.A.

Current Principal Place of Business:

14601 NW 140 ST.
ALACHUA, FL 32615

Current Mailing Address:

P.O. BOX 1478
ALACHUA, FL 32616

FEI Number: 59-3505778

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAUCHON, MARC VDMD
14601 NW 140 ST.
ALACHUA, FL 32616 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 D
Name CAUCHON, MARC VDMD
Address 14601 NW 140 ST.
City-State-Zip: ALACHUA FL 32615

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: MARC V. CAUCHON, DMD

PRESIDENT

02/10/2017

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date