

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000092137

**Entity Name:** SELENA L. MARCHAN, D.M.D., P.A.

**Current Principal Place of Business:**

701 MAYPORT CROSSING BLVD. #7  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

701 MAYPORT CROSSING BLVD.#7  
ATLANTIC BEACH, FL 32233

**FEI Number:** 59-3539676

**Certificate of Status Desired:** No

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

MARCHAN, SELENA L  
2467 BLACKBEARD DR.  
JACKSONVILLE, FL 32224 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            DPTS  
Name            MARCHAN, SELENA L  
Address        2467 BLACKBEARD DR.  
City-State-Zip: JACKSONVILLE FL 32224

*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:** SELENA L MARCHAN

DPTS

01/29/2013

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

\_\_\_\_\_ Date