

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000013920

Entity Name: JOHN I. PARK, D.M.D., P.A.

Current Principal Place of Business:

400 AVE.K,SE,
STE 12
WINTER HAVEN, FL 33880

Current Mailing Address:

400 AVE.K,SE,
STE 12
WINTER HAVEN, FL 33880

FEI Number: 59-3555785

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARK, JOHN I
400 AVE.K,SE,
SUITE 12
WINTER HAVEN, FL 33880 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 PRES
Name PARK, JOHN
Address 400 AVE. K SE STE. 12
City-State-Zip: WINTER HAVEN FL 33880

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 I. PARK, DMD

PRESIDENT

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date