

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000066653

**Entity Name:** D & L DENTAL LAB, INC.

**Current Principal Place of Business:**

9110 KINGS COVE CT  
FORT MYERS, FL 33912

**Current Mailing Address:**

9110 KINGS COVE CT  
FORT MYERS, FL 33912

**FEI Number:** 65-0944034

**Certificate of Status Desired:** Yes

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

SWANSON, DANIEL E  
9110 KINGS COVE COURT  
FT. MYERS, FL 33912 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            SWANSON, DANIEL E  
Address        9110 KINGS COVE COURT  
City-State-Zip: FORT MYERS FL 33912

Title            D  
Name            SWANSON, LISA A  
Address        9110 KINGS COVE CT  
City-State-Zip: FORT MYERS FL 33912

*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:** LISA A SWANSON

**VICE PRESIDENT**

**01/29/2014**

Electronic Signature of Signing Officer/Director Detail

Date