

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 482758

FILED  
Feb 21, 2012  
Secretary of State

Entity Name: JAMES F. WHITE D.M.D, P.A.

## Current Principal Place of Business:

5120 BAYOU BLVD  
CORDOVA MEDICAL DENTAL CENTER  
PENSACOLA, FL 325032102

## New Principal Place of Business:

5120 BAYOU BLVD #D  
CORDOVA MEDICAL DENTAL CENTER  
PENSACOLA, FL 32503

## Current Mailing Address:

5120 BAYOU BLVD  
CORDOVA MEDICAL DENTAL CENTER  
PENSACOLA, FL 325032102

## New Mailing Address:

FEI Number: 59-1627697      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITE, JAMES F  
5120 BAYOU BLVD, CORDOVA MED./DENT. CENTER  
PENSACOLA, FL      US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: PD  
Name: WHITE, JAMES F  
Address: 5120 BAYOU BLVD  
City-St-Zip: PENSACOLA, FL

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: JAMES F WHITE

P/D

02/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date