

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 525231

FILED  
Mar 17, 2011  
Secretary of State

**Entity Name:** JOHN C. GILMORE, JR., D.M.D., P.A.

**Current Principal Place of Business:**

1759 CREIGHTON RD  
PENSACOLA, FL 32504

**New Principal Place of Business:**

**Current Mailing Address:**

1759 CREIGHTON RD  
PENSACOLA, FL 32504

**New Mailing Address:**

FEI Number: 59-1783017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GILMORE, JOHN C. JR.  
1759 CREIGHTON ROAD  
PENSACOLA, FL 32504 US

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

ESTES, TARLA H  
1759 CREIGHTON ROAD  
PENSACOLA, FL 32504 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: TARLA H. ESTES

03/17/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GILMORE, JOHN JR.  
Address: 1759 CREIGHTON RD  
City-St-Zip: PENSACOLA FL,

Title: VP  
Name: GILMORE, BRUCE C  
Address: 1759 CREIGHTON RD  
City-St-Zip: PENSACOLA, FL 32504

Title: ST  
Name: GILMORE, MARGARET J  
Address: 1759 CREIGHTON RD  
City-St-Zip: PENSACOLA, FL 32504

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: TARLA H. ESTES

RA

03/17/2011

Electronic Signature of Signing Officer or Director

Date