2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 552281 1. Entity Name GEORGE J. GOODREAU JR., D.D.S., P.A.				Jan 29, 2002 8:00 am Secretary of State 01-29-2002 90069 017 ***150.00		
Principal Plac	ce of Business	Mailing Address				
516 N MACARTHUR AVE		516 N MACARTHUR AVE				
PANAMA CITY	FL 32401	PANAMA CITY FL 32401		T TERTOT BITON BYTTO STONE PLOCE TRADE TRADE TRADE TRADE BY		
2. Principal Place of Business 3. Mailing Add		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number 59-1782901 Applied F		
Zip .	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent		
GOODREAU, GEORGE J. JR 516 N MACARTHUR AVE			<u> </u>	Name Street Address (P.O. Box Number is Not Acceptable)		
	CITY FL 32401		City	FL Zip Code		
Tax filing i	oration is eligible to satisfy its Intangible. requirement and elects to do so. ria on back)	After May 1, 200	II. FEE IS \$150.00 D2 Fee will be \$550.0 le to Department of	1.00 Trust Fund Contribution Added to For		
11.	OFFICERS AND I	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Goodreau, George J. Jr 516 N Macarthur Ave Panama City Fl	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change A	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WALTER, MELANIE 516 N. MACARTHUR AVE. PANAMA CITY FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ar	ddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAIVAIIA OTT VE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ad	ddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	` ☐ Change ☐ Ad	ddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Ad	ddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS efty-SI-2y	☐ Change ☐ Ad	noitibt	
13. I hereby o	Destrify that the information supplied with to this report or supplemental report is proration or the receiver or trustee importation or the receiver or trustee importance, or on an attachment with an access.	his filing does not qualify for rue and accurate and hat m wered to execute this report th all other likes the power of	the exercation stated in	in Section 119.07(3)(i), Florida Statutes. I further certify that the informati the same legal effect as if made under oath; that I am an officer or direct er 607, Florida Statutes; and that my name appears in Block 11 or Block	ion ctor 12 if	

SIGNATURE: