

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 602324

FILED
Apr 10, 2012
Secretary of State

Entity Name: WATSON FAMILY DENTISTRY, P.A.

Current Principal Place of Business:

5750 HIGHWAY 90
MILTON, FL 32583 US

New Principal Place of Business:

Current Mailing Address:

5750 HIGHWAY 90
MILTON, FL 32583 US

New Mailing Address:

FEI Number: 59-1301248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WATSON, JAMES B
5750 HIGHWAY 90
MILTON, FL 32583 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: P
Name: WATSON, JAMES B
Address: 6300 CHERRY LAUREL DR.
City-St-Zip: MILTON, FL 32570

Title: VP
Name: WATSON, ALTON B
Address: 6300 CHERRY LAUREL DR.
City-St-Zip: MILTON, FL 32570

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 B. WATSON

DR.

04/10/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date