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May 04, 1999 8:00 am
Secretary of State

05-04-1999 90151 044 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 604397

1. Corporation Name

STEPHEN C. TRAWICK, D.D.S., INC.

Principal Place of Business

**1100 AIRPORT BLVD.
 BUILDING A
 PENSACOLA FL 32504**

Mailing Address

**1100 AIRPORT BLVD.
 BUILDING A
 PENSACOLA FL 32504**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/01/1973

4. FEI Number

59-1464081

Applied For	
Not Applicable	

5. Certificate of Status Desired ☐
\$8.75 Additional
 Fee Required
6. Election Campaign Financing
Trust Fund Contribution ☐
\$5.00 May Be
 Added to Fees
8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

**MITCHELL, WILLIAM R
 220 WEST GARDEN STREET
 SUNTRUST TOWER, 9TH FLOOR
 PENSACOLA FL 32501**

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

City & State

Zip

29

Country

30

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
**PD
 TRAWICK, STEPHEN C
 1100 AIRPORT BLVD. BLDG A
 PENSACOLA, FL 00000**
TITLE ☐ DELETE
**S
 TRAWICK, LUCY B
 1100 AIRPORT BLVD. BLDG A
 PENSACOLA, FL 00000**
TITLE ☐ DELETE
**STREET ADDRESS
 CITY-ST-ZIP**
TITLE ☐ DELETE
**STREET ADDRESS
 CITY-ST-ZIP**
TITLE ☐ DELETE
**STREET ADDRESS
 CITY-ST-ZIP**
TITLE ☐ DELETE
**STREET ADDRESS
 CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.01, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 119, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

**PLEASE SIGN
 DATE & MAIL**

8517-55
8520-477-7715