

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortman
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F41205 (8)

1. Corporation Name

S. SCHLISSEL DENTAL, P.A.

Principal Place of Business

2845 61 ST
SARASOTA FL 34243

Mailing Address

2845 61 ST
SARASOTA FL 34243

2. Principal Place of Business

2a. Mailing Address

21 707 7th Street West

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Palmetto, FL

28 Zip

24 34221

25 Country

MANATEE

29 Zip

30 Country

9. Name and Address of Current Registered Agent

SCHLISSEL, SUE D.
2845 61 ST
SUITE 610
SARASOTA FL 34243

3. Date Incorporated or Qualified
08/20/1981

3a. Date of Last Report
02/17/1995

4. FEI Number
59-2120259

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 has liability for intangible tax under s. 190.032,
Florida Statutes

Yes ☐ No ☒

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 of the person authorized to file this report

Signature of the person authorized to file this report

DATE

12. OFFICERS AND DIRECTORS

1. TITLE

NAME
PST
SCHLISSEL, SUE D.
2845 61ST STREET
SARASOTA, FLORIDA 0

2. DELETE

3. STREET ADDRESS

4. CITY & STATE

5. ZIP

6. NAME

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