

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

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F97146

1. Corporation Name

JOHN T. CARTER, D.D.S., P.A.

4-8-96 B-3202-C
(7)



Principal Place of Business

~~921 N. 35TH AVE.~~
HOLLYWOOD FL 33021

Mailing Address

~~921 N. 35TH AVE.~~
HOLLYWOOD FL 33021

2. Principal Place of Business

2a. Mailing Address

21 3829 HOLLYWOOD BLVD

26 3829 HOLLYWOOD BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 HOLLYWOOD, FL

27 HOLLYWOOD, FL

Zip

Country

Zip

Country

24 33021

29 33021

9. Name and Address of Current Registered Agent

CARTER, JOHN T.
921 N. 35TH AVE.
HOLLYWOOD FL 33021

3. Date Incorporated or Qualified

08/27/1982

3a. Date of Last Report

04/10/1995

4. FEI Number

59-2213411

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. 199.032,
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 3829 HOLLYWOOD BLVD

84 City HOLLYWOOD

FL

85 Zip Code

33021

11. Pursuant to the provisions of Section 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

JOHN T. CARTER PRES

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

DATE

3/18/96

12. OFFICERS AND DIRECTORS

☐ DELETE

12.1 TITLE DP
12.2 NAME CARTER, JOHN T
12.3 STREET ADDRESS ~~921 N. 35TH AVE~~
12.4 CITY-STATE-ZIP HOLLYWOOD FL

☐ DELETE

12.5 TITLE
12.6 NAME
12.7 STREET ADDRESS
12.8 CITY-STATE-ZIP

☐ DELETE

12.9 TITLE
12.10 NAME
12.11 STREET ADDRESS
12.12 CITY-STATE-ZIP

☐ DELETE

12.13 TITLE
12.14 NAME
12.15 STREET ADDRESS
12.16 CITY-STATE-ZIP

☐ DELETE

12.17 TITLE
12.18 NAME
12.19 STREET ADDRESS
12.20 CITY-STATE-ZIP

☐ DELETE

12.21 TITLE
12.22 NAME
12.23 STREET ADDRESS
12.24 CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

13.1 TITLE
13.2 NAME
13.3 STREET ADDRESS 3829 HOLLYWOOD BLVD
13.4 CITY-STATE-ZIP

☐ Change ☐ Addition

13.5 TITLE
13.6 NAME
13.7 STREET ADDRESS
13.8 CITY-STATE-ZIP

☐ Change ☐ Addition

13.9 TITLE
13.10 NAME
13.11 STREET ADDRESS
13.12 CITY-STATE-ZIP

☐ Change ☐ Addition

13.13 TITLE
13.14 NAME
13.15 STREET ADDRESS
13.16 CITY-STATE-ZIP

☐ Change ☐ Addition

13.17 TITLE
13.18 NAME
13.19 STREET ADDRESS
13.20 CITY-STATE-ZIP

☐ Change ☐ Addition

13.21 TITLE
13.22 NAME
13.23 STREET ADDRESS
13.24 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or one of the names with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN T. CARTER PRES

3/18/96

(35) 963-7731

CR2E034 (12/95)