

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90001 017 ***585.00

DOCUMENT # J31472

1. Entity Name
DENNIS J. CARMODY, D.D.S., P.A.



Principal Place of Business
**130 SOUTH WOODS DRIVE
ROCKLEDGE, FL 32955**

Mailing Address
**130 SOUTH WOODS DRIVE
ROCKLEDGE, FL 32955**

54064484



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07122004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

59-2683598

Applied For

Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**REINMAN, MATHESON, KOSTRO & VAUGHN, P.A.
1825 S. RIVERVIEW DRIVE
MELBOURNE, FL 32901**

7. Name and Address of New Registered Agent

Name

Dennis J. Carmody

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

130 South Woods Drive

City
Rockledge

FL

Zip Code
32955

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

July 14, 04

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSTD
CARMODY, DENNIS J DDS
130 SOUTH WOODS DRIVE
ROCKLEDGE, FL 32955** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 14, 04

Date

Daytime Phone #

Attachment

54064484
J31472

HEDMAN & WOOTEN, P. A.

Attorneys at Law

Email: jhedmanatty@bellsouth.net

335 S. Plumosa Street, Suite E
Merritt Island, Florida 32952

Telephone: (321) 452-3720

Fax: (321) 452-9096

July 19, 2004

Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314

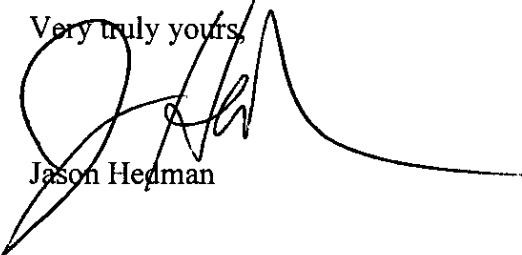
Re: Dennis J. Carmody, D.D.S., P.A.

Dear Sir:

Enclosed herewith with regard to the above-referenced corporation please find original Annual Report for 2004. Also enclosed is a check for \$585.00, representing the filing fee of \$550.00 and \$35.00 for change of the Registered Agent.

Thank you for your assistance in this matter.

Very truly yours,


Jason Hedman

JH:sl
Enclosures

cc: Client (w/o encls.)