

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# K81114

**FILED**  
**May 15, 2013**  
**Secretary of State**

**Entity Name:** STEPHEN C. ENGLISH, D.M.D., P.A.

**Current Principal Place of Business:**

2363-2 DUNN AVE  
JACKSONVILLE, FL 322184601 US

**New Principal Place of Business:**

**Current Mailing Address:**

2363-2 DUNN AVE  
JACKSONVILLE, FL 322184601 US

**New Mailing Address:**

**FEI Number:** 59-2947653

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

STEPHEN C. ENGLISH, DMD  
2363-2 DUNN AVENUE  
JACKSONVILLE, FL 322184601 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:** STEPHEN C. ENGLISH,DMD

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** ENGLISH, STEPHEN C, DMD  
**Address:** 2363-2 DUNN AVE  
**City-St-Zip:** JAX, FL 322184601

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:** STEPHEN C. ENGLISH,DMD

PRES

05/15/2013

Electronic Signature of Signing Officer or Director

Date