

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000084981

FILED
Feb 22, 2012
Secretary of State

Entity Name: GULF COAST ORAL AND MAXILLOFACIAL SURGERY, INC.

Current Principal Place of Business:

4400 BAYOU BLVD. SUITE #44
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

4400 BAYOU BLVD. SUITE #44
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 20-5136046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, RANDALL W
4400 BAYOU BLVD. SUITE #44
PENSACOLA, FL 32503 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: BROWN, RANDALL W DMD
Address: 41A FAIRPOINT AVENUE, STE 41A
City-St-Zip: GULF BREEZE, FL 32561

Title: D
Name: MARSHALL, CHADWICK J
Address: 4400 BAYOU BLVD. #44
City-St-Zip: PENSACOLA, FL 32503

Title: D
Name: SCHEUFLER, ERIC M
Address: 42 BUSINESS CENTRE DR. SUITE#210
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: D
Name: TIMKO, TODD T
Address: 4400 BAYOU BLVD.
City-St-Zip: PENSACOLA, FL 32503

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: RANDALL W BROWN

DR.

02/22/2012

Electronic Signature of Signing Officer or Director

Date