

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093744

Entity Name: HALCYON DENTAL, P.A.

FILED
Feb 03, 2012
Secretary of State

Current Principal Place of Business:

13051 SUMMERFIELD SQUARE DRIVE
RIVERVIEW, FL 33578

New Principal Place of Business:

Current Mailing Address:

13051 SUMMERFIELD SQUARE DRIVE
RIVERVIEW, FL 33578

New Mailing Address:

FEI Number: 26-0768473

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: DPS
Name: CAVIEDES, ERIKA DR.
Address: 13051 SUMMERFIELD SQUARE DR
City-St-Zip: RIVERVIEW, FL 33578

Title: VPT
Name: GULLE, JOSEPH DR.
Address: 13051 SUMMERFIELD SQUARE DR.
City-St-Zip: RIVERVIEW, FL 33578

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: JOSEPH GULLE

VPT

02/03/2012

Electronic Signature of Signing Officer or Director

Date