

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000019265

FILED
Mar 19, 2011
Secretary of State

Entity Name: BRAILLE MARIE WATSON, D.M.D., P.A.

Current Principal Place of Business:

402 N BABCOCK ST
STE 103
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

402 N BABCOCK ST
STE 103
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 26-2057225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATSON, BRAILLE M
215 CHALET AVE.
INDIALANTIC, FL 32903 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: DR.
Name: WATSON, BRAILLE M
Address: 215 CHALET AVE.
City-St-Zip: INDIALANTIC, FL 32903

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: BRAILLE MARIE WATSON, D.M.D., P.A.

DR.

03/19/2011

Electronic Signature of Signing Officer or Director

Date