

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000030150

Entity Name: JOSHUA COLKMIRE DDS PA

FILED
Sep 03, 2010
Secretary of State

Current Principal Place of Business:

1657 PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952 FL

New Principal Place of Business:

1657 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952 FL

Current Mailing Address:

1657 PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952 FL

New Mailing Address:

1657 SE PORT ST LUCIE BLVD
PORT ST LUCIE, FL 34952 FL

FEI Number: 26-2238169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHOCHET, RANDALL M
6308 GRAND CYPRESS CIRCLE
LAKE WORTH, FL 33463 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: RANDALL SHOCHET

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P.D
Name: COLKMIRE, JOSHUA
Address: 928 JACKSON WAY
City-St-Zip: FORT PIERCE, FL 34949 US

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: JOSHUA COLKMIRE

DR.

09/03/2010

Electronic Signature of Signing Officer or Director

Date