

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000055829

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** ALLISON C. HARRIS, D.M.D., P.A.

**Current Principal Place of Business:**

154 MCGREGOR ROAD  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

154 MCGREGOR ROAD  
DELAND, FL 32720

**New Mailing Address:**

FEI Number: 27-3039160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ASTRID DE PARRY, P.A.  
107 E CHURCH ST  
DELAND, FL 32724 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: VP  
Name: HARRIS, ADAM D  
Address: 2547 BUENA VISTA DR  
City-St-Zip: DELAND, FL 32724

Title: PRES  
Name: HARRIS, ALLISON C  
Address: 2547 BUENA VISTA DR  
City-St-Zip: DELAND, FL 32724

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: ALLISON C. HARRIS

PRES

02/08/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date