

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604018

Entity Name: HARRISON DENTAL ASSOCIATES, P.A.

Current Principal Place of Business:

1012 WEST 11TH STREET
1012 W. 11TH STREET
PANAMA CITY, FL 32401

Current Mailing Address:

1012 WEST 11TH STREET
1012 W. 11TH STREET
PANAMA CITY, FL 32401

FEI Number: 59-1466656

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARRISON, FRANKLIN R
406 MAGNOLIA AVENUE
PANAMA CITY, FL 32401 US

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

Officer/Director Detail :

Title PD
Name HARRISON, WILLIAM G
Address 1012 WEST 11TH STREET
City-State-Zip: PANAMA CITY FL 32401

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: WILLIAM G. HARRISON

PD

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date