## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F33651

Entity Name: FAMILY DENTISTREE OF SARASOTA, INC.

**Current Principal Place of Business:** 

3850 S. OSPREY AVE SARASOTA, FL 34239

## **Current Mailing Address:**

3850 S. OSPREY AVE SARASOTA. FL 34239

FEI Number: 65-0044366 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

THOMAS C. TYLER, JR., P.A. 735 E. VENICE AVE., SUITE 200 VENICE, FL 34285 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: THOMAS C. TYLER, JR., PRESIDENT 02/07/2025

Electronic Signature of Registered Agent

Date

FILED Feb 07, 2025

**Secretary of State** 

1113037308CC

## Officer/Director Detail:

Title P Title VP

 Name
 MILLER, JAMES R
 Name
 WEST, SHERWOOD L

 Address
 3850 S. OSPREY AVE
 Address
 3850 S OSPREY AVE

 City-State-Zip:
 SARASOTA FL 34239
 City-State-Zip:
 SARASOTA FL 34239

Title TR, SECRETARY

Name LEONARDS, ANTHONY J
Address 3850 S OSPREY AVE

City-State-Zip: SARASOTA FL 34239

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: ANTHONY J LEONARDS

TR/SEC.

02/07/2025

Electronic Signature of Signing Officer/Director Detail

Date