

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F78902

Entity Name: MICHAEL J. MIHALCIK, D.M.D., P.A.

Current Principal Place of Business:

704 N PALM BOULEVARD
NICEVILLE, FL 32578-1238

Current Mailing Address:

704 N PALM BOULEVARD
NICEVILLE, FL 32578-1238

FEI Number: 59-2182442

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MIHALCIK, MICHAEL J.
704 N PALM BLVD
NICEVILLE, FL 32578 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 MIHALCIK, MICHAEL J.
Address 704 N PALM BLVD.
City-State-Zip: NICEVILLE FL 32578

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: MICHAEL J. MIHALCIK

PD

02/10/2014

Electronic Signature of Signing Officer/Director Detail

Date