

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10217

Entity Name: M. PATRICK ARDOIN II, D.D.S., P.A.

Current Principal Place of Business:

% PROSTHODONTIC ASSOCIATES
3106 MANATEE AVE. WEST
BRADENTON, FL 34205

Current Mailing Address:

% PROSTHODONTIC ASSOCIATES
3106 MANATEE AVE. WEST
BRADENTON, FL 34205

FEI Number: 59-2431423

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARDOIN, PATRICK M
3106 MANATEE AVE. WEST
BRADENTON, FL 34205 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 VP
Name ARDOIN, MERVIN P.
Address 3106 MANATEE AVE W.
City-State-Zip: BRADENTON FL 34205

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: MERVIN P. ARDOIN

VP

02/04/2015

Electronic Signature of Signing Officer/Director Detail

Date