

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10371

Entity Name: CHURNEY DENTAL SERVICES CORPORATION

Current Principal Place of Business:

28469 U.S. HIGHWAY 19, SUITE 401
CLEARWATER, FL 33761

Current Mailing Address:

28469 U.S. HIGHWAY 19, SUITE 401
CLEARWATER, FL 33761 US

FEI Number: 59-2896306

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHURNEY, ROBERT B.
28469 U.S. 19 NORTH
SUITE 401
CLEARWATER, FL 33761 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 P
Name CHURNEY, ROBERT B
Address 28469 US 19 N, STE 401
City-State-Zip: CLEARWATER FL 33761

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: ROBERT CHURNEY

PRESIDENT

02/18/2019

Electronic Signature of Signing Officer/Director Detail

Date