

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H32140

Entity Name: GULF COAST DENTAL CENTER, INC.

Current Principal Place of Business:

2454 N BRENTWOOD CIRCLE
LECANTO, FL 34461

Current Mailing Address:

2454 N BRENTWOOD CIRCLE
LECANTO, FL 34461 US

FEI Number: 59-2473848

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESHKOV, MARTIN
2454 N BRENTWOOD CIRCLE
LECANTOL, FL 34461 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 ESHKOV, MARTIN
Address 2454 N BRENTWOOD CIRCLE
City-State-Zip: LECANTO FL 34461

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: MARTIN ESHKOV

PRESIDENT

03/26/2013

Electronic Signature of Signing Officer/Director Detail

Date