

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L82129

Entity Name: FOUR TOWNS DENTAL SERVICES, P.A.

Current Principal Place of Business:

2490 ENTERPRISE RD
ORANGE CITY, FL 32763

Current Mailing Address:

6240 LAKE OSPREY DR.
SARASOTA, FL 34240 US

FEI Number: 65-0202733

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DIRECTOR
Name GALLO, DONALD
Address 13195 SW 134TH STREET 2ND FLOOR

City-State-Zip: MIAMI FL 33186

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: GALLO , DONALD A

MGR

04/30/2025

Electronic Signature of Signing Officer/Director Detail

Date