

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000029169

Entity Name: STEPHANIE N. MAPP, D.M.D., P.A.

Current Principal Place of Business:

1515 BUSINESS CENTER DRIVE
SUITE 1
FLEMING ISLAND, FL 32003

Current Mailing Address:

1515 BUSINESS CENTER DRIVE
SUITE 1
FLEMING ISLAND, FL 32003 US

FEI Number: 59-3736546

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAPP, STEPHANIE N
2403 GOLDEN BELL LN
FLEMING ISLAND, FL 32003 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 DR
Name MAPP, STEPHANIE N
Address 2403 GOLDEN BELL LN
City-State-Zip: FLEMING ISLAND FL 32003

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: STEPHANIE MAPP

PRESIDENT

09/26/2014

Electronic Signature of Signing Officer/Director Detail

Date