

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000043392

Entity Name: DANIEL P. BARNES PEDIATRIC DENTISTRY, INC.

Current Principal Place of Business:

1440 REED CANAL RD
#3
PORT ORANGE, FL 32129

Current Mailing Address:

1440 REED CANAL RD
#3
PORT ORANGE, FL 32129

FEI Number: 04-3655516

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARNES, DANIEL P
717 BRECKENRIDGE DR
PORT ORANGE, FL 32127 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 D
Name BARNES, DANIEL P
Address 717 BRECKENRIDGE DR
City-State-Zip: PORT ORANGE FL 32127

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: DANIEL P BARNES

OWNER

02/07/2014

Electronic Signature of Signing Officer/Director Detail

Date