2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2017
Secretary of State
CC4252039647

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Entity Name: PAUL LYNCH DDS, P.A.

Current Principal Place of Business:

6630 RIDGE ROAD
PORT RICHEY, FL 34668

Current Mailing Address:

6630 RIDGE ROAD
PORT RICHEY, FL 34668

FEI Number: 75-3093007

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LYNCH, PAUL DDS
8238 BOYCE CT
NEW PORT RICHEY, FL 34654 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	PD
Name	LYNCH, PAUL
Address	8238 BOYCE CT
City-State-Zip:	NEW PORT RICHEY FL 34654

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: PAUL R LYNCH DDS OWNER 01/09/2017

Electronic Signature of Signing Officer/Director Detail — Date