

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048844

Entity Name: PANHANDLE DENTAL CARE, P.A.

Current Principal Place of Business:

516 N MACARTHUR AVE
PANAMA CITY, FL 32401

Current Mailing Address:

516 N MACARTHUR AVE
PANAMA CITY, FL 32401

FEI Number: 20-0867901

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OTT, WILLIAM L
516 N MACARTHUR AVE
PANAMA CITY, FL 32401 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 OTT, WILLIAM L
Address 516 N MACARTHUR AVE
City-State-Zip: PANAMA CITY FL 32401

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: WILLIAM L. OTT

DIRECTOR

03/19/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date