2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2016
Secretary of State
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Entity Name: JOHNS CREEK FAMILY AND COSMETIC DENTISTRY, P.A.

Current Principal Place of Business:

113 NATURE WALK PARKWAY
SUITE #108
ST AUGUSTINE, FL 32092

Current Mailing Address:

P.O. BOX 600144
JACKSONVILLE, FL 32260

FEI Number: 26-0539234

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOSEPH, BENJAMIN JR
113 NATURE WALK PARKWAY
SUITE #108
ST AUGUSTINE, FL 32092 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	PVST
Name	JOSEPH, BENJAMIN JR
Address	P.O. BOX 600144
City-State-Zip:	JACKSONVILLE FL 32260

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: BENJAMIN JOSEPH, JR. PVST 04/28/2016

Electronic Signature of Signing Officer/Director Detail — Date