

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000093744

Entity Name: HALCYON DENTAL, P.A.

Current Principal Place of Business:

13051 SUMMERFIELD SQUARE DR
RIVERVIEW, FL 33578

Current Mailing Address:

13051 SUMMERFIELD SQUARE DR
RIVERVIEW, FL 33578 US

FEI Number: 26-0768473

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MARK WILLIAMS

04/22/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name CAVIEDES, ERIKA
Address 13051 SUMMERFIELD SQ. DRIVE
City-State-Zip: RIVERVIEW FL 33578

Title PRESIDENT
Name CAVIEDES, ERIKA
Address 13051 SUMMERFIELD SQ. DRIVE
City-State-Zip: RIVERVIEW FL 33578

Title VICE-PRESIDENT
Name GULLE, JOSEPH
Address 13051 SUMMERFIELD SQ. DRIVE
City-State-Zip: RIVERVIEW FL 33578

Title SECRETARY
Name CAVIEDES, ERIKA
Address 13051 SUMMERFIELD SQ. DRIVE
City-State-Zip: RIVERVIEW FL 33578

Title TREASURER
Name GULLE, JOSEPH
Address 13051 SUMMERFIELD SQ. DRIVE
City-State-Zip: RIVERVIEW FL 33578

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: JOSEPH GULLE

VICE PRESIDENT

04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date