### 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000046867

Entity Name: TOWNCARE DENTAL OF CUTLER BAY, P.A.

Apr 23, 2013 Secretary of State CC0548236522

**FILED** 

# **Current Principal Place of Business:**

20533 OLD CUTLER ROAD CUTLER BAY, FL 33189

# **Current Mailing Address:**

6240 LAKE OSPREY DR. SARASOTA, FL 34240 US

FEI Number: 27-0300610 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

NICHOLS, DAVID 6240 LAKE OSPREY DR. SARASOTA, FL 34240 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: DAVID NICHOLS 04/23/2013

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title DIR

Name GOBER, MELVYN SDDS

Address 13195 SW 134 STREET, 2ND FLOOR

City-State-Zip: MIAMI FL 33186

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: MELVYN GOBER

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