

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000046867

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

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

03/13/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GALLO, DONALD
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: DONALD GALLO

DIRECTOR

03/13/2015

Electronic Signature of Signing Officer/Director Detail

Date