

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000074453

**Entity Name:** TRACY M. ECKLES, DDS, P.A.

**Current Principal Place of Business:**

1903 HOLLY STREET  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1903 HOLLY STREET  
TALLAHASSEE, FL 32303 US

**FEI Number:** 47-1796045

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ECKLES, TRACY M  
1903 HOLLY STREET  
TALLAHASSEE, FL 32303 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 P  
Name ECKLES, TRACY M DDS  
Address 1903 HOLLY STREET  
City-State-Zip: TALLAHASSEE FL 32303

Title VP  
Name ECKLES, MICHAEL A  
Address 1903 HOLLY STREET  
City-State-Zip: TALLAHASSEE FL 32303

*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:** TRACY M. ECKLES

CEO

04/08/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date