Current Mai	ling Address:			
472 JACKSONVILLE DR JACKSONVILLE BEACH, FL 32250 US				
FEI Number: 47-4485014		Certificate of Status Desired: No		
Name and Address of Current Registered Agent:				
LANDIS, JOHN F. 472 JACKSONVILLE DR JACKSONVILLE BEACH, FL 32250 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	: JOHN F. LANDIS, DDS		(3/02/2022
SIGNATURE	E: JOHN F. LANDIS, DDS Electronic Signature of Registered Agent		(03/02/2022 Date
SIGNATURE	Electronic Signature of Registered Agent		(
	Electronic Signature of Registered Agent	Title	VP	
Officer/Dire	Electronic Signature of Registered Agent	Title Name		
Officer/Dire	Electronic Signature of Registered Agent ctor Detail : P		VP	
Officer/Dire Title Name	Electronic Signature of Registered Agent ctor Detail : P LANDIS, JOHN F. 472 JACKSONVILLE DR	Name	VP LANDIS, JOHN F.	Date
Officer/Dire Title Name Address	Electronic Signature of Registered Agent ctor Detail : P LANDIS, JOHN F. 472 JACKSONVILLE DR	Name Address	VP LANDIS, JOHN F. 472 JACKSONVILLE DR.	Date
Officer/Dire Title Name Address City-State-Zip:	Electronic Signature of Registered Agent ctor Detail : P LANDIS, JOHN F. 472 JACKSONVILLE DR JACKSONVILLE BEACH FL 32250	Name Address City-State-Zip:	VP LANDIS, JOHN F. 472 JACKSONVILLE DR. JACKSONVILLE BEACH FL 3225	Date

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000057188

Entity Name: JOHN LANDIS, DDS, P.A.

Current Principal Place of Business:

472 JACKSONVILLE DR JACKSONVILLE BEACH, FL 32250

(

City-State-Zip: JACKSONVILLE BEACH FL 32250

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: LANDIS, JOHN L

Ρ

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date

FILED Mar 02, 2022 **Secretary of State** 3468746597CC

City-State-Zip: JACKSONVILLE BEACH FL 32250