

2024 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

Current Mailing 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

01/31/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name LANDIS, JOHN F.
Address 472 JACKSONVILLE DR
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title VP
Name LANDIS, JOHN F.
Address 472 JACKSONVILLE DR.
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title T
Name LANDIS, JOHN F.
Address 472 JACKSONVILLE DR
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title SECRETARY
Name LANDIS, JOHN F
Address 472 JACKSONVILLE DR
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: JOHN F LANDIS

DDS

01/31/2024

Electronic Signature of Signing Officer/Director Detail

Date