

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000012223

Entity Name: AFFORDABLE DENTURES - PORT ST. LUCIE III, P.A.

Current Principal Place of Business:

9140 S. FEDERAL HIGHWAY (U.S. 1)
PORT ST. LUCIE, FL 34952

Current Mailing Address:

PO BOX 1042
KINSTON, NC 28503 US

FEI Number: 81-1366778

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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, D
Name FENTON, DANIEL M DMD
Address 9140 S. FEDERAL HIGHWAY (U.S. 1)
City-State-Zip: PORT ST. LUCIE FL 34952

Title S
Name SLEZAK, DAVID
Address PO BOX 1042
City-State-Zip: KINSTON NC 28503

Title T
Name STEELMAN, S. PAUL
Address PO BOX 1042
City-State-Zip: KINSTON NC 28503

Title AS
Name AMMONS, RANDAL
Address PO BOX 1042
City-State-Zip: KINSTON NC 28503

Title AS
Name MILLER, KATHY
Address PO BOX 1042
City-State-Zip: KINSTON NC 28503

Title AS
Name RODRIGUEZ-LEBRON, ANNETTE
Address PO BOX 1042
City-State-Zip: KINSTON NC 28503

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: RANDAL G. AMMONS

ASSISTANT SECRETARY 04/29/2018

Electronic Signature of Signing Officer/Director Detail

Date