

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000019582

Entity Name: RIVERWALK FAMILY DENTISTRY, INC.

Current Principal Place of Business:

2199 EAST SEMORAN BLVD.
APOPKA, FL 32703

Current Mailing Address:

2199 EAST SEMORAN BLVD.
APOPKA, FL 32703

FEI Number: 59-3175171

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIDSON SUZANNE N.
2199 E SEMORAN BLVD
APOPKA, FL 32703 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 PRESIDENT
Name DAVIDSON, SUZANNE N DR.
Address 2199 E.SEMORAN BLVD
City-State-Zip: APOPKA FL 32703

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: SUZANNE N. DAVIDSON, D.M.D

PRESIDENT

03/31/2017

Electronic Signature of Signing Officer/Director Detail

Date