### 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000028250

Entity Name: LIMITED TO ENDODONTICS-SOUTHWEST, P.A.

FILED
Mar 15, 2017
Secretary of State
CC2077960312

# **Current Principal Place of Business:**

3440 TAMIAMI TRAIL

UNIT 3

PORT CHARLOTTE, FL 33952

# **Current Mailing Address:**

3440 TAMIAMI TRAIL

UNIT 3 PORT CHARLOTTE, FL 33952 US

FEI Number: 65-0404100 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SIDDIQI, DENNIS DR. 3440 TAMIAMI TRAIL, LINIT 3

UNIT 3
PORT CHARLOTTE, FL 33952 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 DR. Title DR.

NameMCGRADY, WILLIAM DNameCAMMARATO, III, VINCENT TAddress3440 TAMIAMI TRAIL , UNIT 3Address3440 TAMIAMI TRAIL , UNIT 3City-State-Zip:PORT CHARLOTTE FL 33952City-State-Zip:PORT CHARLOTTE FL 33952

Title DR.

Name SIDDIQI, DENNIS

Address 3440 TAMIAMI TRAIL, UNIT 3
City-State-Zip: PORT CHARLOTTE FL 33952

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: DENNIS SIDDIQI

Electronic Signature of Signing Officer/Director Detail

PART OWNER

03/15/2017