

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000000248

**Entity Name:** JOHN M. ANDREWS, D.M.D., P.A.

**Current Principal Place of Business:**

1705 GARDEN ST.  
TITUSVILLE, FL 32796

**Current Mailing Address:**

1705 GARDEN ST.  
TITUSVILLE, FL 32796

**FEI Number: 59-3287624**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ANDREWS, JOHN M DR.  
1705 GARDEN ST.  
TITUSVILLE, FL 32796 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 M ANDREWS DMD

02/01/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name ANDREWS, JOHN M DR.  
Address 1705 GARDEN ST.  
City-State-Zip: TITUSVILLE FL 32796

*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 M ANDREWS DMD

DENTIST

02/01/2022

Electronic Signature of Signing Officer/Director Detail

Date