## **2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000070649

Entity Name: BRIAN ALLEN, D.M.D., PA

**Current Principal Place of Business:** 

2105 S. TAMIAMI TRAIL OSPREY, FL 34229

**Current Mailing Address:** 

2105 S. TAMIAMI TRAIL OSPREY, FL 34229

FEI Number: 65-0606739 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, BRIAN D.M.D. 310 BAYSHORE DR OSPREY, FL 34229 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

**FILED** Jan 11, 2014

**Secretary of State** 

CC4539800320

## Officer/Director Detail:

Title

Name ALLEN, BRIAN K Address 310 BAYSHORE DR City-State-Zip: OSPREY FL 34229

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: BRIAN K. ALLEN

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/11/2014 Date