

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000069859

**Entity Name:** TERESA K. BRIGANCE, DMD, MS, P.A.

**Current Principal Place of Business:**

3760 N. WICKHAM RD  
SUITE 1  
MELBOURNE, FL 32935

**Current Mailing Address:**

3760 N. WICKHAM RD  
SUITE 1  
MELBOURNE, FL 32935 US

**FEI Number: 59-3396132**

**Certificate of Status Desired: No**

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

BRIGANCE, TERESA K  
3760 N. WICKHAM RD  
SUITE 1  
MELBOURNE, FL 32935 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            D  
Name            BRIGANCE, TERESA K  
Address        3760 N. WICKHAM RD, SUITE 1  
City-State-Zip: MELBOURNE FL 32935

Title            PST  
Name            BRIGANCE, TERESA K  
Address        3760 N. WICKHAM ROAD, SUITE 1  
City-State-Zip: MELBOURNE FL 32935

*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: TERESA K. BRIGANCE**

**DIRECTOR**

**04/10/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date