

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000100383

Entity Name: PAUL A. PALO, D.M.D., P.A.

Current Principal Place of Business:

151 AVENUE F, NW
WINTER HAVEN, FL 33881

Current Mailing Address:

151 AVENUE F, NW
WINTER HAVEN, FL 33881

FEI Number: 59-3417334

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALO, PAUL A
151 AVENUE F, NW
WINTER HAVEN, FL 33881 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.
Name PALO, PAUL ADMD
Address 151 AVENUE F, NW
City-State-Zip: WINTER HAVEN FL 33881

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: PAUL A PALO DMD

OWNER

02/23/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date