

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028275

Entity Name: ANTHONY T. DEAN, D.D.S., P.A.

Current Principal Place of Business:

945 LANE AVE SOUTH
JACKSONVILLE, FL 32205-4706

Current Mailing Address:

945 LANE AVE SOUTH
JACKSONVILLE, FL 32205-4706

FEI Number: 59-3435623

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEAN, ANTHONY T
945 LANE AVE SOUTH
JACKSONVILLE, FL 32205-4706 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 DP
Name DEAN, ANTHONY T
Address 945 LANE AVE SOUTH
City-State-Zip: JACKSONVILLE FL 32205-4706

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: ANTHONY T DEAN DDS

PRESIDENT

01/14/2015

Electronic Signature of Signing Officer/Director Detail

Date