

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000028519

**Entity Name:** MARK A. BARBER, D.D.S., P.A.

**Current Principal Place of Business:**

718 S.E. BECKER ROAD  
PORT ST. LUCIE, FL 34984

**Current Mailing Address:**

718 S.E. BECKER ROAD  
PORT ST. LUCIE, FL 34984

**FEI Number:** 65-0758623

**Certificate of Status Desired:** No

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

BARBER, JUDY A  
718 S.E. BECKER ROAD  
PORT ST. LUCIE, FL 34984 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 BARBER, MARK A  
Address 718 S. E. BECKER ROAD  
City-State-Zip: PORT ST. LUCIE FL 34984

Title DST  
Name BARBER, JUDY A  
Address 718 S.E. BECKER ROAD  
City-State-Zip: PORT ST. LUCIE FL 34984

*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:** JUDY BARBER

DST

04/01/2019

Electronic Signature of Signing Officer/Director Detail

Date