

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000035083

Entity Name: COMFORTABLE DENTAL CARE, P.A.

Current Principal Place of Business:

3616 WOODLAKE DRIVE
BONITA SPRINGS, FL 34134

Current Mailing Address:

3616 WOODLAKE DRIVE
BONITA SPRINGS, FL 34134 US

FEI Number: 65-0480662

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASHTON, W CRAIG
3616 WOODLAKE DRIVE
BONITA SPRINGS, FL 34134 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 ASHTON, W. CRAIG
Address 3616 WOODLAKE DRIVE
City-State-Zip: BONITA SPRINGS FL 34134

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: W. CRAIG ASHTON

DIRECTOR

04/04/2019

Electronic Signature of Signing Officer/Director Detail

Date