

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S66005

Entity Name: MARY I. PORTER, D.M.D., P.A.

Current Principal Place of Business:

4987 RINGWOOD MEADOW
SARASOTA, FL 34235

Current Mailing Address:

4987 RINGWOOD MEADOW
SARASOTA, FL 34235 US

FEI Number: 65-0278182

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PORTER, MARY I
4987 RINGWOOD MEADOW
SARASOTA, FL 34235 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 PORTER, MARY
Address 4987 RINGWOOD MEADOW
City-State-Zip: SARASOTA FL 34235

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: MARY PORTER

DENTIST

06/02/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date