

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V62449

Entity Name: MCCLEMENS DENTAL LAB, INC.

Current Principal Place of Business:

210 7TH AVENUE NORTH
SUITE 1
ST. PETERSBURG, FL 33701

Current Mailing Address:

1200 MERIWETHER STREET
CHARLOTTESVILLE, VA 22902 US

FEI Number: 65-0359841

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MC CLEMENS, CHARLES E
210 7TH AVENUE NORTH
SUITE 1
ST. PETERSBURG, FL 33701 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 MCCLEMENS, CHARLES E
Address 1200 MERIWETHER STREET
City-State-Zip: CHARLOTTESVILLE VA 22902

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: CHARLES E MCCLEMENS, CDT, TE

PRESIDENT

02/28/2014

Electronic Signature of Signing Officer/Director Detail

Date