

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V62449

Entity Name: MCCLEMENS DENTAL LAB, INC.

Current Principal Place of Business:

5919 WINGSPAN WAY
BRADENTON, FL 34203

Current Mailing Address:

5919 WINGSPAN WAY
BRADENTON, FL 34203 US

FEI Number: 65-0359841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MC CLEMENS, CHARLES E
5919 WINGSPAN WAY
BRADENTON, FL 34203 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 5919 WINGSPAN WAY
City-State-Zip: BRADENTON FL 34203

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

PRESIDENT

04/04/2013

Electronic Signature of Signing Officer/Director Detail

Date