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.

OWNER

SIGNATURE: CHARLES ASBRIDGE

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P16000011299

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: HAMMERHEAD DENTAL CONSULTING INC

Current Principal Place of Business:

444 WEST PIPKIN ROAD LAKELAND, FL 33813

Current Mailing Address:

444 WEST PIPKIN ROAD LAKELAND, FL 33813 US

FEI Number: 81-1321016

Name and Address of Current Registered Agent:

ASBRIDGE, CHARLES 444 WEST PIPKIN ROAD LAKELAND, FL 33813 US

NU, FL 33013 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

Officer/Director Detail :

Title	Р	Title	VP
Name	ASBRIDGE, CHARLES	Name	ASBRIDGE SR., CHARLES B
Address	444 WEST PIPKIN ROAD	Address	1400 BILL MURRAY ROAD
City-State-Zip:	LAKELAND FL 33813	City-State-Zip:	FRIENDSHIP TN 38034
Title	VP		
Title Name	VP WALDING, STEPHEN J		

Certificate of Status Desired: No

FILED Apr 12, 2018 Secretary of State CC8347920392

04/12/2018

Date

Date