

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000002355

Entity Name: WESTSIDE REGIONAL MEDICAL STAFF, INC.

Current Principal Place of Business:

8201 WEST BROWARD BLVD.
ATTN: MEDICAL STAFF OFFICE
PLANTATION, FL 33324

Current Mailing Address:

8201 WEST BROWARD BLVD.
ATTN: MEDICAL STAFF OFFICE
PLANTATION, FL 33324 US

FEI Number: 47-3335175

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LUSTHAUS, ADAM M
370 CAMINO GARDENS BLVD
SUITE 343
BOCA RATON, FL 33432 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 P
Name CORALLO, JOSEPH MD
Address 8201 W. BROWARD BLVD.
City-State-Zip: PLANTATION FL 33324

Title VP
Name PEREZ, DANIEL MD
Address 8201 W. BROWARD BLVD.
City-State-Zip: PLANTATION FL 33324

Title T
Name LAGO, CHARLES MD
Address 8201 W. BROWARD BLVD.
City-State-Zip: PLANTATION FL 33324

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH CORALLO, MD

PRESIDENT

04/06/2019

Electronic Signature of Signing Officer/Director Detail

Date