

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 458971

Entity Name: T. TERRY CHUTINAN, M.D., P.A.

Current Principal Place of Business:

800 N. HIGHWAY 434,
SUITE #4
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

800 N. HIGHWAY 434,
SUITE #4
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-1555221

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHUTINAN, T. TERRY, M.D.
800 N. HIGHWAY 434
SUITE 4
ALTAMONTE SPRINGS, FL 32714 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 CHUTINAN, T. TERRY
Address 800 N. HWY 434, STE 4
City-State-Zip: ALTAMONTE SPRGS. FL

Title S
Name CHUTINAN, KUNNIKA
Address 800 N. HWY 434
City-State-Zip: ALTAMONTE SPRGS. FL

Title D
Name CHUTINAN, GRACE
Address 800 N. HWY 434, STE 4
City-State-Zip: ALTAMONTE SPRINGS FL

Title D
Name CHUTINAN, PETER
Address 800 N. HWY 434, STE 4
City-State-Zip: ALTAMONTE SPRINGS FL

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: KUNNIKA CHUTINAN

S

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date