

2019 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 573104

Entity Name: EMERGENCY PHYSICIANS, INC.**Current Principal Place of Business:**841 PRUDENTIAL DRIVE
SUITE 1400
JACKSONVILLE, FL 32207**Current Mailing Address:**841 PRUDENTIAL DRIVE
SUITE 1400
JACKSONVILLE, FL 32207 US**FEI Number:** 59-1835473**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITH HULSEY & BUSEY
ONE INDEPENDENT DRIVE
SUITE 3300
JACKSONVILLE, FL 32202 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 CEO
Name RILL, MATTHEW M.D.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name PATEL, RAJNIKANT M.D.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name COLLINS, CECILA M.D.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name GILLIGAN, BRIAN M.D.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title SECRETARY, DIRECTOR
Name CHAPMAN, GREGORY D.O.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name SMOWTON, JEFFREY M.D.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name MCCANN, MICHAEL D.O.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name MURRAY, DAVID M.D.
Address 841 PRUDENTIAL DRIVE
SUITE 1400
City-State-Zip: JACKSONVILLE FL 32207

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: MATTHEW RILL, M.D.

CEO

10/18/2019

Electronic Signature of Signing Officer/Director Detail

Date