#### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### **DOCUMENT# 600266**

Entity Name: DOCTORS MCCLOW, CLARK & BERK, P.A.

## **Current Principal Place of Business:**

**1912 HAMILTON STREET** SUITE 201 JACKSONVILLE, FL 32210

## **Current Mailing Address:**

1912 HAMILTON ST SUITE 201 JACKSONVILLE, FL 32210

## FEI Number: 59-1162456

### Name and Address of Current Registered Agent:

TOLEDO, ANTHONY S 1912 HAMILTON ST SUITE 201 JACKSONVILLE, FL 32210 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	ANTHONY S. TOLEDO			02/05/2016
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	DIRECTOR AND PRESIDENT	Title	DIRECTOR AND TREASURER	
Name	TOLEDO, ANTHONY S	Name	DUNN, JOSEPH L	
Address	1912 HAMILTON ST SUITE 201	Address	1912 HAMILTON ST SUITE 201	
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210	
Title	DIRECTOR	Title	DIRECTOR	
Name	FREEMAN, MARC H	Name	DONOHUE, MICHAEL T	
Address	1912 HAMILTON ST SUITE 201	Address	1912 HAMILTON ST SUITE 201	
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210	
Title	DIRECTOR	Title	DIRECTOR AND SECRETARY	
Name	ROMAN, CHRISTOPHER D	Name	BROWN, ZACHARY E	
Address	1912 HAMILTON ST SUITE 201	Address	1912 HAMILTON ST SUITE 201	
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210	
Title	DIRECTOR	Title	DIRECTOR AND VP	
Name	JURASIC, MATEO V	Name	REZAEI, ARIO	
Address	1912 HAMILTON ST SUITE 201	Address	1912 HAMILTON ST SUITE 201	
City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210	

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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.

#### 02/05/2016 SIGNATURE: ANTHONY S. TOLEDO PRESIDENT Electronic Signature of Signing Officer/Director Detail

# FILED Feb 05, 2016 Secretary of State CC1477573944

Certificate of Status Desired: No

Date

#### **Officer/Director Detail Continued :**

Title	DIRECTOR
Name	RUSSELL, JAMES M
Address	1912 HAMILTON ST SUITE 201
City-State-Zip:	JACKSONVILLE FL 32210