

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 600326

Entity Name: FLAGLER MEDICAL ASSOCIATES, P.A.

Current Principal Place of Business:

1552 PALM BEACH LAKES BLVD
WEST PALM BEACH, FL 33401

Current Mailing Address:

1552 PALM BEACH LAKES BLVD
WEST PALM BEACH, FL 33401

FEI Number: 59-1199726

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RATTINGER, MARK D. M.D.
1552 PALM BEACH LAKES BLVD
WEST PALM BCH, FL 33401 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 RATTINGER, MARK D
Address 1552 PALM BEACH LAKES BLVD
City-State-Zip: WEST PALM BCH FL 33401

Title V
Name STEINBERG, ROBERT A.
Address 1552 PALM BEACH LAKES BLVD
City-State-Zip: W PALM BCH FL 33401

Title D
Name FORTIER, DANIEL
Address 1552 PALM BEACH LAKES BLVD
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name MARK, TIMOTHY
Address 1552 PALM BEACH LAKES BLVD
City-State-Zip: WEST PALM BEACH FL 33401

Title D
Name GALANTE, MIRTA
Address 1552 PALM BEACH LAKES BLVD
City-State-Zip: WEST PALM BEACH FL 33401

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: RATTINGER, MARK D

PRESIDENT

03/01/2017

Electronic Signature of Signing Officer/Director Detail

Date