#### **2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F68420

Entity Name: CARDIOLOGY ASSOCIATES OF CHARLOTTE COUNTY, P.A.

FILED
Jan 29, 2021
Secretary of State
8397812162CC

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

2300 LOVELAND BLVD PUNTA GORDA. FL 33980

# **Current Mailing Address:**

P.O. BOX 495156

ATTN: VICTORIA LUNSFORD

PT. CHARLOTTE, FL 33949-5156 US

FEI Number: 59-2171328 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

GARRETT, ROBERT B 2300 LOVELAND BLVD PUNTA GORDA, FL 33952 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 VP Title PRESIDENT

Name GARRETT, ROBERT B Name HEARN, JAMES A

Address 1129 CONOVER ST Address 16000 RIDGEWOOD CT

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PUNTA GORDA FL 33982

**TREASURER** Title **SECRETARY** Title Name TRIOLA, BRIAN R ROSENFIELD, LOUIS D Name Address 2300 LOVELAND BLVD Address 2300 LOVELAND BLVD PUNTA GORDA FL 33980 City-State-Zip: PUNTA GORDA FL 33980 City-State-Zip:

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.

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