2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2020
Secretary of State
5713414147CC

DOCUMENT# G88342

Entity Name: LEWIS & KLANCKE CARDIOLOGY, P.A.

Current Principal Place of Business:

695 NORTH CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32114

Current Mailing Address:

695 NORTH CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32114

FEI Number: 59-2385440

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAYOS, GLENN H MD
695 N CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32114 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: GLENN H. RAYOS, MD 01/27/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D
Name	RAYOS, GLENN HMD
Address	695 N. CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	D
Name	WEST, OSCAR DR.
Address	695 N. CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	D
Name	SEIDE, HANSCY DR.
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	LAZARD, MARIELLE DR.
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	D
Name	WILSON, VANCE EMD
Address	695 N CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL

Title	D
Name	BROOME-WEBSTER, CHAD LMD
Address	695 N CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	BARTHOLOMEW, BETH DR.
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	HORENSTEIN, JOSHUA DR.
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

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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.

SIGNATURE: GLENN RAYOS, MD OFFICER 01/27/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	D
Name	RAO, SURYA DR.
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	OFFICER
Name	PETERSON DO, VINCENT
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

Title	DIRECTOR
Name	BHAVSAR, JANAK DR.
Address	695 NORTH CLYDE MORRIS BLVD
City-State-Zip:	DAYTONA BEACH FL 32114