

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H19574

Entity Name: BRADENTON CARDIOLOGY CENTER, P.A.**Current Principal Place of Business:**316 MANATEE AVE. W.
BRADENTON, FL 34205**Current Mailing Address:**316 MANATEE AVE. W.
BRADENTON, FL 34205**FEI Number:** 59-2440279**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ROTHFELD, JEFFREY M DR.
316 MANATEE AVE W
BRADENTON, FL 34205 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:** JEFFREY M. ROTHFELD

04/08/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name LIPSKIND, BRUCE R
Address 316 MANATEE AVE. W
City-State-Zip: BRADENTON FL 34205

Title PRESIDENT
Name ROTHFELD, JEFFREY M
Address 316 MANATEE AVE. W
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name PARENT, EUGENE M
Address 316 MANATEE AVE W
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name MATHEWS, SANTHOSH J
Address 316 MANATEE AVE W
City-State-Zip: BRADENTON FL 34205

Title SECRETARY
Name FRIEDMAN, DANIEL E
Address 316 MANATEE AVE W
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name NGUYEN, JAMES H
Address 316 MANATEE AVE. W.
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name BUCK, DAVID C JR.
Address 316 MANATEE AVE W
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name HOLYK, BRIAN W
Address 316 MANATEE AVE W
City-State-Zip: BRADENTON FL 34205

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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: JEFFREY W ROTHFELD

PRESIDENT

04/08/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name COLLINS, JARED A
Address 316 MANATEE AVE. W.
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name NGUYEN, MICHELLE DR.
Address 316 MANATEE AVE W
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name CEVALLOS, CHARLES A
Address 316 MANATEE AVE. W.
City-State-Zip: BRADENTON FL 34205