

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H60345

Entity Name: CENTER FOR REPRODUCTIVE MEDICINE, P.A.

Current Principal Place of Business:

1500 SOUTH ORLANDO AVENUE,
SUITE 200
WINTER PARK, FL 32789

Current Mailing Address:

1500 SOUTH ORLANDO AVENUE,
SUITE 200
WINTER PARK, FL 32789 US

FEI Number: 59-2542546

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOY, RANDALL ALAN DR.
1500 S ORLANDO AVE
SUITE 200
WINTER PARK, FL 32789-5500 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: RANDALL A LOY

03/06/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name LOY, RANDALL ALAN
Address 1500 SOUTH ORLANDO AVENUE,
SUITE 200
City-State-Zip: WINTER PARK FL 32789

Title VP
Name JAFFE, SHARON, MD
Address 1500 SOUTH ORLANDO AVENUE,
SUITE 200
City-State-Zip: WINTER PARK FL 32789

Title ST
Name PATEL, SEJAL MD
Address 1500 SOUTH ORLANDO AVENUE,
SUITE 200
City-State-Zip: WINTER PARK FL 32789

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: RANDALL A LOY

PRESIDENT

03/06/2018

Electronic Signature of Signing Officer/Director Detail

Date