## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J22496

Entity Name: GAINESVILLE PODIATRY ASSOCIATES, P.A.

**Current Principal Place of Business:** 

915 N.W. 56TH TERR.

GAINESVILLE. FL 32605-6408

**Current Mailing Address:** 

915 N.W. 56TH TERR.

GAINESVILLE, FL 32605-6408

FEI Number: 59-2712499 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERENS, THOMAS A. 915 N.W. 56TH TERR.

GAINESVILLE, FL 32605-6409 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

**FILED** Mar 01, 2020

**Secretary of State** 

6875532410CC

Officer/Director Detail:

Title Title VΡ

BERENS, THOMAS A. Name BERENS, LINDA L. Name 915 N.W. 56TH TERR. Address 915 N.W. 56TH TERR. Address City-State-Zip: GAINESVILLE FL 32605

GAINESVILLE FL 32605-6408 City-State-Zip:

Title SD

HEISER, JOHN R. Name 915 NW 56 TERR Address City-State-Zip: GAINESVILLE FL

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: THOMAS BERENS

Electronic Signature of Signing Officer/Director Detail

**PRESIENT** 

03/01/2020