## 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K54504

Entity Name: ANTHONY DECOTIS, M.D., P.A.

**Current Principal Place of Business:** 

131 BEAL PKWY NW FT WALTON BCH. FL 32548

**Current Mailing Address:** 

131 BEAL PKWY NW

FT WALTON BCH. FL 32548 US

FEI Number: 59-2918630 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DECOTIS, ANTHONY MD 131 BEAL PARKWAY NW FT WALTON BCH, FL 32548 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 Apr 25, 2019

**Secretary of State** 

3098634956CC

## Officer/Director Detail:

Title DR.

Name DECOTIS, ANTHONY MD Address 131 NW BEAL PKWY

City-State-Zip: FT WALTON BEACH FL 32548

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: ANTHONY DECOTIS, MD

**PRESIDENT** 

04/25/2019

Electronic Signature of Signing Officer/Director Detail

Date