

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000060994

**Entity Name:** GLENN A. TOVAR DIAS, M.D., P.A.

**Current Principal Place of Business:**

14350 METROPOLIS AVENUE  
SUITE #1  
FORT MYERS, FL 33912

**Current Mailing Address:**

P O BOX 61570  
FORT MYERS, FL 33906-1570 US

**FEI Number:** 65-1017823

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUTLER, GAREY F  
FOWLER WHITE  
2201 SECOND STREET, 5TH FLOOR  
FORT MYERS, FL 33901 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

**Officer/Director Detail :**

Title P  
Name TOVAR DIAS, GLENN A M.D.  
Address 14350 METROPOLIS AVENUE, SUITE  
#1  
City-State-Zip: FORT MYERS FL 33912

*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 TOVAR DIAS

PRES

04/24/2019

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date