## **2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000064954

Entity Name: NEW TAMPA MEDICAL CENTER PA

**Current Principal Place of Business:** 

5381 PRIMROSE LAKE CIRCLE

TAMPA, FL 33647

## **Current Mailing Address:**

5381 PRIMROSE LAKE CIRCLE TAMPA FL 33647 US

FEI Number: 59-3658059 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DUROJAIYE, BABATOLA 5381 PRIMROSE LAKE CIRCLE TAMPA FL 33647 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 Jul 17, 2016

**Secretary of State** 

CC5413930235

## Officer/Director Detail:

Title MD

Name DUROJAIYE, BABATOLA

Address 5381 PRIMROSE LAKE CIRCLE

City-State-Zip: TAMPA FL 33647

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: BABATOLA DUROJAIYE

**PRESIDENT** 

07/17/2016

Electronic Signature of Signing Officer/Director Detail

Date