

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000001599

**Entity Name:** GOPI OF FLORIDA, INC.**Current Principal Place of Business:**305 E. BURLEIGH BLVD  
TAVARES, FL 32778**Current Mailing Address:**450-106 SR 13 N  
BOX 238  
ST JOHNS, FL 32259 US**FEI Number:** 59-3701331**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PATEL, ATUL  
1248 RIBBON RD.  
JACKSONVILLE, FL 32259 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	PATEL, VIJAY
Address	1861 W. WINDY WAY
City-State-Zip:	JACKSONVILLE FL 32259

Title	S
Name	MOTIWALA, BHADRESH
Address	4347 EAGLE LANDING PARKWAY
City-State-Zip:	ORANGE PARK FL 32065

Title	S
Name	PATEL, A
Address	305 E. BURLEIGH BLVD
City-State-Zip:	TAVARES FL 32778

Title	VP
Name	KAPADIA, VISPY
Address	5924 AUVERS BLVD. 106
City-State-Zip:	ORLANDO FL 32807

Title	SECRETARY
Name	NOBLE, SHUEEN
Address	305 E. BURLEIGH BLVD
City-State-Zip:	TAVARES FL 32778

*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:** VIJAY PATEL**PRESIDENT****03/02/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date