

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000035443

**Entity Name:** FEITZ FOOT CLINIC, P.A.

**Current Principal Place of Business:**

2424 FRANKFORD AVE.  
PANAMA CITY, FL 32405

**Current Mailing Address:**

2424 FRANKFORD AVE.  
PANAMA CITY, FL 32405 US

**FEI Number:** 91-2128328

**Certificate of Status Desired:** No

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

FEITZ, DANIEL E  
2424 FRANKFORD AVE.  
PANAMA CITY, FL 32405 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:** DANIEL E FEITZ

04/05/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSTD  
Name FEITZ, DANIEL E  
Address 2424 FRANKFORD AVE.  
City-State-Zip: PANAMA CITY FL 32405

Title D  
Name FEITZ, MARLENE  
Address 2424 FRANKFORD AVE.  
City-State-Zip: PANAMA CITY FL 32405

*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:** DANIEL FEITZ

DR

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date