

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000094351

Entity Name: THE CENTER FOR PRACTICE EXCELLENCE, INC.

Current Principal Place of Business:

1105 SW 16TH STEET
BOYNTON BEACH, FL 33426

Current Mailing Address:

1105 SW 16TH STREET
BOYNTON BEACH, FL 33426 US

FEI Number: 30-0031192

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPINOSA, WILLIAM V
1105 SW 16TH STREET
BOYNTON BEACH, FL 33426 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 SPINOSA, WILLIAM V
Address 1105 SW 16TH STREET
City-State-Zip: BOYNTON BEACH FL 33426

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: WILLIAM V SPINOSA

PRESIDENT

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date