

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000110386

Entity Name: WILLIAM F. RYLANDER, M.D., P.A.

Current Principal Place of Business:

407 SOUTH WASHINGTON AVE
SUITE 1
TITUSVILLE, FL 32796

Current Mailing Address:

PO BOX 2939
TITUSVILLE, FL 32781 US

FEI Number: 59-3759523

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITE, W GRAHAM
250 PARK AVE SOUTH5TH FLOOR
WINTER PARK, FL 32789 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 D, PRESIDENT
Name RYLANDER, WILLIAM FMD
Address 407 S.WASHINGTON AVE., STE1
City-State-Zip: TITUSVILLE FL 32796

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 RYLANDER,M.D.

D, PRESIDENT

04/10/2019

Electronic Signature of Signing Officer/Director Detail

Date