# 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060008

Entity Name: CROSS CREEK MEDICAL, PA

## Current Principal Place of Business:

1381 CROSS CREEK CIRCLE #A TALLAHASSEE, FL 32301

# **Current Mailing Address:**

1381 CROSS CREEK CIRCLE #A TALLAHASSEE, FL 32301

## FEI Number: 14-1852106

## Name and Address of Current Registered Agent:

SAMPSON, WAYNE ANTHONY DR. 1605 GROVELAND HILLS DR. TALLAHASSEE, FL 32317 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: WAYNE SAMPSON

Electronic Signature of Registered Agent

## Officer/Director Detail :

TitlePRESNameSAMPSON, WAYNE AMDAddress1381 A CROSS CREEK CIRCLE

City-State-Zip: TALLAHASSEE FL 32301

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.

PRESIDENT

#### SIGNATURE: WAYNE SAMPSON

Electronic Signature of Signing Officer/Director Detail

FILED Apr 24, 2020 Secretary of State 3074266396CC

Certificate of Status Desired: No

04/24/2020

Date

04/24/2020