

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000121217

**Entity Name:** EMERALD COAST SPORTS MEDICINE AND ORTHOPAEDICS,  
P.A.

**FILED**  
**Apr 05, 2016**  
**Secretary of State**  
**CC3085903779**

**Current Principal Place of Business:**

339 RACETRACK RD.  
SUITE 12  
FORT WALTON BEACH, FL 32547

**Current Mailing Address:**

339 RACETRACK RD.  
SUITE 12  
FORT WALTON BEACH, FL 32547

**FEI Number: 65-1160592**

**Certificate of Status Desired: No**

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

MCINNIS, C. JEFFREY  
909 MAR WALT DRIVE SUITE 1014  
FORT WALTON BEACH, FL 32547 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 CHEN, LEO CMD  
Address 339 RACETRACK RD. STE 12  
City-State-Zip: FORT WALTON BEACH FL 32547

*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: LEO C CHEN MD**

**PRESIDENT**

**04/05/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date