ORLANDO,	FL 32835			
FEI Number: 56-2408723			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
REGISTERED A 155 OFFICE PL TALLHASSEE,				
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.				
The above hamed		<b>.</b>	0, ,	
	: JACLYN WRIGHT			05/01/2019
	Electronic Signature of Registered Agent			05/01/2019
SIGNATURE	Electronic Signature of Registered Agent	Title		05/01/2019
SIGNATURE	JACLYN WRIGHT Electronic Signature of Registered Agent ctor Detail :			05/01/2019
SIGNATURE Officer/Direc Title	JACLYN WRIGHT Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	DIRECTOR	05/01/2019 Date

SIGNATURE: NAYANA VYAS, MD

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

05/01/2019

Date

## FILED May 01, 2019 **Secretary of State** 4188536364CC

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000068997

Entity Name: FAMILY PHYSICIANS GROUP, INC.

## **Current Principal Place of Business:**

6416 OLD WINTER GARDEN RD ORLANDO, FL 32835

## **Current Mailing Address:**

6416 OLD WINTER GARDEN RD ORLANDO, FL 32835

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