

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000156071

Entity Name: BERND RAPHAEL, M.D., P.A.

Current Principal Place of Business:

470 LEE BLVD
LEHIGH ACRES, FL 33936

Current Mailing Address:

C/O DAVID A HOLMES
99 NESBIT STREET
PUNTA GORDA, FL 33950 US

FEI Number: 20-0632493

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLMES, DAVID A ESQ.
C/O DAVID HOLMES
99 NESBIT STREET
PUNTA GORDA, FL 33950 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: DAVID A. HOLMES

04/24/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PVST
Name RAPHAEL, BERND
Address 470 LEE BLVD.
City-State-Zip: LEHIGH ACRES FL 33936

Title D
Name RAPHAEL, BERND
Address 470 LEE BLVD.
City-State-Zip: LEHIGH ACRES FL 33936

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: BERND RAPHAEL

PRESIDENT

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date