

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000018933

Entity Name: SOUTHCOAST ALLERGY, P.A.

Current Principal Place of Business:

4592 E. HWY. 20
STE 3
NICEVILLE, FL 32578

Current Mailing Address:

4592 E. HWY. 20
STE 3
NICEVILLE, FL 32578 US

FEI Number: 20-0693455

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PITELL, LISA Y
4591 E. HWY. 20
NICEVILLE, FL 32578 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 PRES
Name KOVACS, ENDRE
Address 1723 WREN WAY
City-State-Zip: NICEVILLE FL 32578

Title MANAGER
Name EWING, DANNA
Address 4592 E. HWY. 20
 STE 3
City-State-Zip: NICEVILLE FL 32578

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: ENDRE KOVACS, M.D.

PRESIDENT

04/13/2015

Electronic Signature of Signing Officer/Director Detail

Date