

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000023964

Entity Name: ECONFINA CARDIOLOGY ESTATES, INC.**Current Principal Place of Business:**504 CHERRY ST
PANAMA CITY, FL 32401**Current Mailing Address:**504 CHERRY ST
PANAMA CITY, FL 32401**FEI Number:** 34-1978535**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COOK, JAMES T
504 CHERRY STREET
PANAMA CITY, FL 32401 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:** JAMES T. COOK

01/25/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name COOK, JAMES TIII
Address 504 CHERRY ST
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name MANER, THOMPSON C
Address P.O. BOX 27182
City-State-Zip: PANAMA CITY FL 32411

Title DIRECTOR
Name TRANTHAM, JOEY L
Address 625 BALDWIN RD. SUITE C
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name STOKES, MICHAEL J
Address 625 BALDWIN RD. SUITE C
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name BADDIGAM, HARI K
Address 106 MEDICAL CENTER DRIVE
City-State-Zip: PANAMA CITY FL 32405

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: JAMES T. COOK, III, M.D.

PRESIDENT

01/25/2024

Electronic Signature of Signing Officer/Director Detail

Date