

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000064496

Entity Name: HARBOR NEUROSURGICAL ASSOCIATES, P.A.

Current Principal Place of Business:

517 TAMIAMI TRAIL
PUNTA GORDA, FL 33950

Current Mailing Address:

517 TAMIAMI TRAIL
PUNTA GORDA, FL 33950 US

FEI Number: 20-1019136

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERSHKOWITZ, DOUGLAS M
517 TAMIAMI TRAIL
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name HERSHKOWITZ, DOUGLAS M
Address 3415 TRIPOLI BLVD
City-State-Zip: PUNTA GORDA FL 33950

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: DOUGLAS HERSHKOWITZ

DIRECTOR

02/18/2019

Electronic Signature of Signing Officer/Director Detail

Date