

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000079182

Entity Name: C.H.W. FLORIDA MEDICAL, INCORPORATED

Current Principal Place of Business:

2823 EXECUTIVE PARK DRIVE
WESTON, FL 33331

Current Mailing Address:

2823 EXECUTIVE PARK DRIVE
WESTON, FL 33331 US

FEI Number: 20-1129967

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GLASSMAN, LEE DESQ.
8000 PETERS ROAD
SUITE A-200
PLANTATION, FL 33324 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 P
Name MESSA, CHARLES M.D.
Address 2823 EXECUTIVE PARK DRIVE
City-State-Zip: WESTON FL 33331

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: CHARLES A. MESSA, III

PRESIDENT

01/28/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date