

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000099711

**Entity Name:** CARLOS CHANG, M.D., P.A.

**Current Principal Place of Business:**

1862 MAYO DRIVE  
TAVARES FL 32778

**Current Mailing Address:**

PO BOX 1363  
MOUNT DORA, FL 32756-1363 US

**FEI Number:** 20-1325238

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHANG, CARLOS M.D.  
1003 JULIETTE BLVD  
MOUNT DORA, FL 32757 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 CHANG, CARLOS M.D.  
Address 1003 JULIETTE BLVD  
City-State-Zip: MOUNT DORA FL 32757

*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:** CARLOS CHANG, MD

**DIRECTOR**

**01/04/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date