

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000058069

Entity Name: JULIE ANN FLOYD, M.D., P.A.

Current Principal Place of Business:

2784 N ROOSEVELT BLVD
KEY WEST, FL 33040

Current Mailing Address:

P.O. BOX 5294
KEY WEST, FL 33045

FEI Number: 54-2179191

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLOYD, JULIE ANN
2784 N ROOSEVELT BLVD
KEY WEST, FL 33040 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 DR
Name FLOYD, JULIE ANN
Address 2784 N. ROOSEVELT BLVD.
City-State-Zip: KEY WEST FL 33040

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: JULIEANN FLOYD

OWNER

01/23/2016

Electronic Signature of Signing Officer/Director Detail

Date