

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013417

Entity Name: BARRY J. WECKESSER, M.D., P.A.

Current Principal Place of Business:

916 EAGLE ISLE COURT
OSPREY, FL 34229

Current Mailing Address:

P. O. BOX 830
OSPREY, FL 34229 US

FEI Number: 20-4215617

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE HEART INSTITUTE OF VENICE
1370 EAST VENICE AVENUE
SUITE 102
VENICE, FL 34285 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 PVST
Name WECKESSER, BARRY JM.D.
Address P.O. BOX 830
City-State-Zip: OSPREY FL 34229

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: BARRY J. WECKESSER, M.D.

OWNER

01/14/2016

Electronic Signature of Signing Officer/Director Detail

Date