## 2017 FLORIDA PROFIT CORPORATION REINSTATEMENT

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: BARRY J WECKESSER MD 10/02/2017

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.

FILED Oct 02, 2017

**Secretary of State** 

CR8315792435