

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000057241

**Entity Name:** ROXANNE LOUH, P.A.

**Current Principal Place of Business:**

1702 EMERSON ST UNIT 3  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4578 CARRARA COURT  
JACKSONVILLE, FL 32224 US

**FEI Number:** 26-0158781

**Certificate of Status Desired:** No

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

LOUH, ROXANNE PSYD  
1702 EMERSON ST UNIT 3  
JACKSONVILLE, FL 32207 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 LOUH, ROXANNE  
Address 3215 HENDRICKS AVE, SUITE 3  
City-State-Zip: JACKSONVILLE FL 32207

*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:** ROXANNE LOUH

**PRESIDENT**

**04/20/2015**

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

\_\_\_\_\_  
Date