

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000031240

**Entity Name:** PARAMOUNT URGENT CARE, INC

**Current Principal Place of Business:**

805 EAST CR 466  
LADY LAKE, FL 32159

**Current Mailing Address:**

805 EAST CR 466  
LADY LAKE, FL 32159 US

**FEI Number:** 61-1558329

**Certificate of Status Desired:** No

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

PARAMOUNT URGENT CARE INC  
805 EAST CR 466  
LADY LAKE, FL 32159 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:** ADRIAN EASTERLING

01/16/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PTD	Title	VPD
Name	HUMPHREY, MICHAEL	Name	EASTERLING, ADRIAN J
Address	805 EAST CR 466	Address	805 EAST CR 466
City-State-Zip:	LADY LAKE FL 32159	City-State-Zip:	LADY LAKE FL 32159

*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:** MICHAEL HUMPHREY

**PRESIDENT**

01/16/2020

Electronic Signature of Signing Officer/Director Detail

Date