

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000077945

**Entity Name:** HEALTHWORKS MED GROUP OF FLORIDA, P.A.

**Current Principal Place of Business:**

205 MILLER SPRINGS COURT  
FRANKLIN, TN 37064

**Current Mailing Address:**

205 MILLER SPRINGS COURT  
FRANKLIN, TN 37064 US

**FEI Number: 26-3235124**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRESIDENT, SECRETARY,  
                      TREASURER, DIRECTOR  
Name            BROOME, ROCHELLE DR.  
Address        205 MILLER SPRINGS COURT  
City-State-Zip: FRANKLIN TN 37064

*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: DR. ROCHELLE BROOME**

**PRESIDENT**

**04/27/2014**

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

\_\_\_\_\_ Date