

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000042331

**Entity Name:** GENESIS OB/GYN, PA

**Current Principal Place of Business:**

1025 N. BEAL PKWY  
SUITE C  
FT WALTON BEACH, FL 32547

**Current Mailing Address:**

PO BOX 728  
MARY ESTHER, FL 32569 US

**FEI Number:** 27-0176099

**Certificate of Status Desired:** No

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

SEATON, JENNIFER  
1025 N. BEAL PKWY  
SUITE C  
FT WALTON BEACH, FL 32547 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            SEATON, JENNIFER  
Address        1796 BRIDGEPORT COLONY LN  
City-State-Zip: FORT WALTON BEACH FL 32547

Title            VP  
Name            SEATON, GREGORY  
Address        1796 BRIDGEPORT COLONY LN  
City-State-Zip: FORT WALTON BEACH FL 32547

*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:** JENNIFER SEATON

P

04/20/2017

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

\_\_\_\_\_  
Date