

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000042331

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

**Current Principal Place of Business:**

501 SAMANA WAY  
NICEVILLE, FL 32578

**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  
501 SAMANA WAY  
NICEVILLE, FL 32578 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	Title	VP
Name	SEATON, JENNIFER	Name	SEATON, GREGORY
Address	PO BOX 728	Address	PO BOX 728
City-State-Zip:	MARY ESTHER FL 32569	City-State-Zip:	MARY ESTHER FL 32569

*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**

**04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date