#### 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000005932

Entity Name: CMS OF BOCA RATON, INC.

### **Current Principal Place of Business:**

1001 NW 7 STREET BOCA RATON. FL 33486

# **Current Mailing Address:**

1001 NW 7 STREET

100

BOCA RATON, FL 33486

FEI Number: 27-1894856 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

THE LAW OFFICES OF HAROLD V. HICKEY, P.A. 7800 RED ROAD 305 SOUTH MIAMI, FL 33143 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: HAROLD V. HICKEY 04/14/2016

Electronic Signature of Registered Agent

Date

FILED Apr 14, 2016

**Secretary of State** 

CC3141302640

### Officer/Director Detail:

Title P Title VP

NameELMSTEDT, ROBERTNameELMSTEDT, ROBERTAddress1001 NW 7 STREETAddress1001 NW 7 STREETCity-State-Zip:BOCA RATON FL 33486City-State-Zip:BOCA RATON FL 33486

Title T Title S

NameELMSTEDT, ROBERTNameFAKLA, ISTVANAddress1001 NW 7 STREETAddress1001 NW 7 STREETCity-State-Zip:BOCA RATON FL 33486City-State-Zip:BOCA RATON FL 33486

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.