

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000087353

Entity Name: MEDICAL CENTER OF ORLANDO INC.

Current Principal Place of Business:

4711 CURRY FORD RD STE C
ORLANDO, FL 32812

Current Mailing Address:

4711 CURRY FORD RD STE C
ORLANDO, FL 32812

FEI Number: 47-2175538

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BERENGUER, RAMON A
4711 CURRY FORD RD STE C
ORLANDO, FL 32812 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 PD
Name BERENGUER, RAMON A
Address 4711 CURRY FORD RD STE C
City-State-Zip: ORLANDO FL 32812

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: RAMON A BERENGUER

P

04/06/2015

Electronic Signature of Signing Officer/Director Detail

Date