

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000063800

Entity Name: APOGEE MEDICAL ASSOCIATES, P.A.

Current Principal Place of Business:

3028 CARING WAY
SUITE 4
PORT CHARLOTTE, FL 33952

Current Mailing Address:

PO BOX 494127
PORT CHARLOTTE, FL 33949 US

FEI Number: 81-3456462

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DE, CHITRADEEP
3028 CARING WAY
SUITE 4
PORT CHARLOTTE, FL 33952 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: CHITRADEEP DE

02/28/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DE, CHITRADEEP
Address 3028 CARING WAY
 SUITE 4
City-State-Zip: PORT CHARLOTTE FL 33952

Title VP
Name LAKHANI, MAYUR
Address 3028 CARING WAY
 SUITE 4
City-State-Zip: PORT CHARLOTTE FL 33952

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: CHITRADEEP DE

PRESIDENT

02/28/2024

Electronic Signature of Signing Officer/Director Detail

Date