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.

DIRECTOR

SIGNATURE: HARVEY L. ECHOLS, MD

Electronic Signature of Signing Officer/Director Detail

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000077185

Entity Name: SHEFFIELD MEDICAL CONSULTANTS, INC.

Current Principal Place of Business:

1704 HARRINGTON PARK DRIVE JACKSONVILLE, FL 32225

Current Mailing Address:

1704 HARRINGTON PARK DRIVE JACKSONVILLE, FL 32225 US

FEI Number: 82-2909156

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	: CHRIS DAS			04/27/2023
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DIRECTOR	Title	PRESIDENT	
Name	ECHOLS, MD, HARVEY L.	Name	ECHOLS, MD, HARVEY L.	
Address	1704 HARRINGTON PARK DRIVE	Address	1704 HARRINGTON PARK DRIV	E
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32225	

Certificate of Status Desired: No

FILED Apr 27, 2023 Secretary of State 3826302237CC

04/27/2023