2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000048258

Entity Name: MANATEE SARASOTA EYE CLINIC, P.A.

Current Principal Place of Business:

217 MANATEE AVENUE EAST BRADENTON, FL 34208

Current Mailing Address:

217 MANATEE AVENUE EAST BRADENTON, FL 34208 US

FEI Number: 65-0425039 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRIEDBERG, MURRAY 217 MANATEE AVENUE EAST BRADENTON, FL 34208 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: MURRAY FRIEDBERG 01/24/2023

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title MD Title MD

EDELMAN, ROBERT Name SILVERMAN, SCOTT E Name

217 MANATEE AVE E Address 217 MANATEE AVENUE EAST Address

City-State-Zip: **BRADENTON FL 34208 BRADENTON FL 34208** City-State-Zip:

Title MD Title MD

Name POOJA, KHATOR FRIEDBERG, MURRAY Name Address 217 MANATEE AVE E Address 217 MANATEE AVE E **BRADENTON FL 34208** City-State-Zip:

Title MD

City-State-Zip:

DAVIS. JEFFREY Name

Address 217 MANATEE AVENUE EAST

BRADENTON FL 34208

City-State-Zip: BRADENTON FL 34208

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: MURRAY FRIEDBERG, MD

CO-PRESIDENT

01/24/2023

FILED Jan 24, 2023

Secretary of State

5896617048CC

Electronic Signature of Signing Officer/Director Detail

Date