## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049358

Entity Name: E. JAKE JACOBO, M.D., P.A.

**Current Principal Place of Business:** 

515 WEST S.R. 434 SUITE 302 LONGWOOD, FL 32750

515 WEST S.R. 434

## **Current Mailing Address:**

PO BOX 1806

WINTER PARK, FL 32790 US

FEI Number: 59-3191235 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JACOBO, E. JAKE 515 WEST S.R. 434 SUITE 302 LONGWOOD, FL 32750 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

FILED Jan 10, 2015

**Secretary of State** 

CC2098507547

## Officer/Director Detail:

Title DR

Name JACOBO, E. JAKE Address 1700 ALABAMA DR

City-State-Zip: WINTER PARK FL 32789

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.