

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060631

Entity Name: CLASSICAL MEDICINE OF ST. PETERSBURG, INC.

Current Principal Place of Business:

1140 LOCUST ST NE
ST PETERSBURG, FL 33701

Current Mailing Address:

1140 LOCUST STREET NE
ST PETERSBURG, FL 33701 US

FEI Number: 59-3263789

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KEANE, LAURA
1140 LOCUST STREET NE
ST PETERSBURG, FL 33701 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 DP
Name KEANE, LAURA
Address 1140 LOCUST STREET NE
City-State-Zip: ST PETERSBURG FL 33701

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: LAURA KEANE

PRESIDENT

01/18/2020

Electronic Signature of Signing Officer/Director Detail

Date