

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000089828

**Entity Name:** ALOMA PARK OB/GYN, P.A.

**Current Principal Place of Business:**

1925 MIZELL AVENUE  
SUITE 104  
WINTER PARK, FL 32792

**Current Mailing Address:**

1925 MIZELL AVENUE  
SUITE 104  
WINTER PARK, FL 32792 US

**FEI Number:** 59-3281858

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

DEAN MEAD SERVICES, LLC  
420 S. ORANGE AVENUE  
SUITE 700  
ORLANDO, FL 32801 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 PSTD  
Name DESPRES, BERNARD T  
Address 1925 MIZELL AVENUE., STE. 104  
City-State-Zip: WINTER PARK FL 32792

*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:** BERNARD T DESPRES, DO

**PRESIDENT**

**01/12/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date