DOCUMENT# P95000009210

Entity Name: RALPH A. ROPHIE, M.D., P.A.

Current Principal Place of Business:

1239 EWING AVENUE CLEARWATER, FL 33756-3407

Current Mailing Address:

450 PALM IS SE CLEARWATER, FL 33767-1938

FEI Number: 59-3297339

Name and Address of Current Registered Agent:

ROPHIE, RALPH A DR. 450 PALM IS SE CLEARWATER, FL 33767-1938 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: RALPH ROPHIE

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PST
Name	ROPHIE, RALPH A DR.
Address	1239 EWING AVENUE
City-State-Zip:	CLEARWATER FL 33756

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: RALPH ROPHIE

PRESIDENT/OWNER 01/14/2015

Electronic Signature of Signing Officer/Director Detail

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FILED Jan 14, 2015 Secretary of State CC2618291701

Certificate of Status Desired: No

01/14/2015

Date

Date