

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000045596

**Entity Name:** ALLIED HEALTHCARE ASSOCIATES, P.A.

**Current Principal Place of Business:**

406 AIRPORT DR. S.  
SUMMERLAND KEY, FL 33042-4421

**Current Mailing Address:**

406 AIRPORT DR. S.  
SUMMERLAND KEY, FL 33042-4421 US

**FEI Number:** 23-2802407

**Certificate of Status Desired:** No

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

MAUST, KEITH E DR.  
406 AIRPORT DR. S.  
SUMMERLAND KEY, FL 33042-4421 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:** DR. KEITH E. MAUST

03/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/D  
Name MAUST, KEITH E DR.  
Address 406 AIRPORT DR. S.  
City-State-Zip: SUMMERLAND KEY FL 33042-4421

*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:** DR. KEITH E MAUST

PRESIDENT

03/15/2021

Electronic Signature of Signing Officer/Director Detail

Date