## 2017 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 03/28/2017

Electronic Signature of Registered Agent

Date

FILED Mar 28, 2017

**Secretary of State** 

CC6423283326

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.