

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000068647

Entity Name: CHARLENE Q. OKOMSKI, D.O., P.A.

Current Principal Place of Business:

2484 CARING WAY
UNIT D
PORT CHARLOTTE, FL 33952

Current Mailing Address:

2484 CARING WAY
UNIT D
PORT CHARLOTTE, FL 33952 US

FEI Number: 65-0773070

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUINN, JAMES P
615 W MARION AVE
PUNTA GORDA, FL 33950 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 D
Name OKOMSKI, CHARLENE Q
Address 615 W MARION AVE
City-State-Zip: PUNTA GORDA FL 33950

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: CHARLENE OKOMSKI

PRESIDENT

07/20/2016

Electronic Signature of Signing Officer/Director Detail

Date