

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000076698

**Entity Name:** BAYSIDE EMERGENCY PHYSICIANS, P.A.

**Current Principal Place of Business:**

500 DR MARTIN LUTHER KING JR ST N  
STE 304  
ST PETERSBURG, FL 33705

**Current Mailing Address:**

1032 E BRANDON BLVD,  
#5253  
BRANDON, FL 33511 US

**FEI Number: 59-3535333**

**Certificate of Status Desired: Yes**

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

VIRTUAL POST SOLUTIONS, INC.  
1032 E BRANDON BLVD,  
BRANDON, FL 33511 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: STEPHEN FEILINGER**

**03/20/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	SECRETARY	Title	PRESIDENT
Name	WENDELL, CATHERINE M	Name	FEILINGER, STEPHEN
Address	500 DR MARTIN LUTHER KING JR ST N STE 304	Address	500 DR MARTIN LUTHER KING JR ST N STE 304
City-State-Zip:	ST PETERSBURG FL 33705	City-State-Zip:	ST PETERSBURG FL 33705
Title	DIRECTOR	Title	TREASURER
Name	SCHULMAN, BEBE	Name	PAUL, ROBERT
Address	500 DR MARTIN LUTHER KING JR ST N STE 304	Address	500 DR MARTIN LUTHER KING JR ST N STE 304
City-State-Zip:	ST PETERSBURG FL 33705	City-State-Zip:	ST PETERSBURG FL 33705
Title	DIRECTOR	Title	DIRECTOR
Name	BALL, DAVID	Name	BARNES, JACQUELINE
Address	500 DR MARTIN LUTHER KING JR ST N STE 304	Address	500 DR MARTIN LUTHER KING JR ST N STE 304
City-State-Zip:	ST PETERSBURG FL 33705	City-State-Zip:	ST PETERSBURG FL 33705
Title	DIRECTOR	Title	DIRECTOR
Name	MENDIOLA, LAWRENCE	Name	MELLACE, CHRISTINE
Address	500 DR MARTIN LUTHER KING JR ST N STE 304	Address	500 DR MARTIN LUTHER KING JR ST N STE 304
City-State-Zip:	ST PETERSBURG FL 33705	City-State-Zip:	ST PETERSBURG FL 33705

*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: STEPHEN FEILINGER**

**PRESIDENT**

**03/20/2024**

Electronic Signature of Signing Officer/Director Detail

Date