

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000079923

**Entity Name:** LISA M. JUDGE, M.D., P.A.

**Current Principal Place of Business:**

552 TWIN CITIES BLVD. SUITE C  
NICEVILLE, FL 32578

**Current Mailing Address:**

552 TWIN CITIES BLVD. SUITE C  
NICEVILLE, FL 32578

**FEI Number:** 59-3531729

**Certificate of Status Desired:** No

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

FLEET, H BART  
FLEET, SPENCER, MARTIN & KILPATRICK, PA  
1104 EGLIN PARKWAY  
SHALIMAR, FL 32579-0000 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 DR  
Name JUDGE, LISA M  
Address 552 TWIN CITIES BLVD STE C  
City-State-Zip: NICEVILLE FL 32578

*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:** LISA M JUDGE

**PRESIDENT**

**05/22/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date