

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000071819

**Entity Name:** CHRIS R. GELVIN, M.D., P.A.

**Current Principal Place of Business:**

1217 S EAST AVE  
301  
SARASOTA, FL 34239

**Current Mailing Address:**

1217 S EAST AVE  
301  
SARASOTA, FL 34239

**FEI Number:** 65-0940492

**Certificate of Status Desired:** No

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

GELVIN, CHRIS  
128 GOLDEN GATE POINTE  
UNIT 901-1001  
SARASOTA, FL 34236 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 GELVIN, CHRIS R  
Address 128 GOLDEN GATE POINTE  
UNIT 901-1001  
City-State-Zip: SARASOTA FL 34236

*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:** CHRIS R GELVIN

**OWNER**

**01/24/2023**

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

\_\_\_\_\_  
Date