

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000081187

Entity Name: HEART OF FLORIDA OB-GYN ASSOCIATES, P.A.

Current Principal Place of Business:

2221 NORTH BLVD WEST
DAVENPORT, FL 33837

Current Mailing Address:

HEART OF FL OB/GYN
PO BOX 667
DAVENPORT, FL 33836

FEI Number: 59-3598026

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SAN MARTIN, JULIO
2221 NORTH BLVD W
DAVENPORT, FL 33837 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 P
Name SAN MARTIN, JULIO R
Address 2221 NORTH BLVD W
City-State-Zip: DAVENPORT FL 33837

Title VP
Name SALAMANCA, EDWIN M
Address 2221 NORTH BLVD W
City-State-Zip: DAVENPORT FL 33837

Title S
Name ALKASS, MARK
Address 2221 NORTH BLVD W
City-State-Zip: DAVENPORT FL 33837

Title O
Name ANDAH, EDMUND K
Address 2221 NORTH BLVD W
City-State-Zip: DAVENPORT FL 33837

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: MARK ALKASS

SEC

02/07/2014

Electronic Signature of Signing Officer/Director Detail

Date