

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005062

Entity Name: DARON SCHERR, M.D., P.A.

Current Principal Place of Business:

12601 MASTIQUE BEACH BLVD.
#501
FORT MYERS, FL 33908

Current Mailing Address:

12601 MASTIQUE BEACH BLVD.
#501
FORT MYERS, FL 33908 US

FEI Number: 84-1615052

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHERR, DARON L MD
12601 MASTIQUE BEACH BLVD.
#501
FORT MYERS, FL 33908 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 PCD
Name SCHERR, DARON L MD
Address 12601 MASTIQUE BEACH BLVD.
#501
City-State-Zip: FORT MYERS FL 33908

Title VPST
Name SCHERR, DARON L MD
Address 12601 MASTIQUE BEACH BLVD.
#501
City-State-Zip: FORT MYERS FL 33908

Title VC
Name SCHERR, DARON L MD
Address 12601 MASTIQUE BEACH BLVD.
#501
City-State-Zip: FORT MYERS FL 33908

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: DARON SCHERR

DIRECTOR

03/02/2015

Electronic Signature of Signing Officer/Director Detail

Date