

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000001282

**Entity Name:** DOCTOR ON DEMAND PROFESSIONALS OF MICHIGAN, P.C.,  
P.A.

**FILED**  
**Apr 23, 2024**  
**Secretary of State**  
**9511457398CC**

**Current Principal Place of Business:**

1 CALIFORNIA STREET  
SUITE 2300  
SAN FRANCISCO, CA 94111

**Current Mailing Address:**

1 CALIFORNIA STREET  
SUITE 2300  
SAN FRANCISCO, CA 94111 US

**FEI Number: 46-4400979**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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      TREASURER, DIRECTOR, PRESIDENT  
Name      THAMES, TODD A MD  
Address    1 CALIFORNIA STREET  
            SUITE 2300  
City-State-Zip:    SAN FRANCISCO CA 94111

Title      SECRETARY, DIRECTOR  
Name      DEAN, KRISTIN MD  
Address    1 CALIFORNIA STREET  
            SUITE 2300  
City-State-Zip:    SAN FRANCISCO CA 94111

*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: TODD A. THAMES MD**

**PRESIDENT**

**04/23/2024**

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

\_\_\_\_\_  
Date