

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000010025

FILED
Aug 18, 2014
Secretary of State

Entity Name: TAMPA BAY MEDICAL GROUP MANAGEMENT ASSOCIATION INCORPORATED

Current Principal Place of Business:

1211 N. WESTSHORE BLVD
TAMPA, FL 33607

New Principal Place of Business:

2514 HOLLYHOCK CT
CLEARWATER, FL 33761 US

Current Mailing Address:

1211 N. WESTSHORE BLVD
TAMPA, FL 33607

New Mailing Address:

2514 HOLLYHOCK CT
CLEARWATER, FL 33761 US

FEI Number: 20-5733332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANKS, MICHAEL
1211 N. WESTSHORE BLVD.
106
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

RYAN, VICKI
2514 HOLLYHOCK CT
CLEARWATER, FL 33761 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: VICTORIA L RYAN

08/18/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: VICKI, RYAN
Address: 2514 HOLLYHOCK CT
City-St-Zip: CLEARWATER, FL 33761 US

Title: S
Name: TREZONA, JON
Address: 1901 ULMERTON RD, SUITE 450
City-St-Zip: CLEARWATER, FL 33762 US

Title: T
Name: BOB, HEIER
Address: 2727 W DR MLK JR BLVD, #310
City-St-Zip: TAMPA, FL 33607 US

Title: P
Name: ANN, CRUTCHFIELD
Address: 1720 CYPRESS TRACE DR
City-St-Zip: SAFETY HARBOR, FL 34695 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICTORIA L RYAN

D

08/18/2014

Electronic Signature of Signing Officer or Director

Date