FOR PROFIT CORPORATION UNFORM BUSINESS REPORT (UBR)

DOCUMENT # PO/0005/377 KEVIN V. PALMER, M.D. PA



FILED

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SECRETARY OF STATE FALLAHASSEE, FLORIDA

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an	DO NOT WRITE	IN IMIS SE	ACE		
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REVIN V. PALMER, M.D. PRESIDENT

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