

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001316

Entity Name: THE FLORIDA MEDICAL CLINIC FOUNDATION OF CARING, INC.

Current Principal Place of Business:

38135 MARKET SQUARE
ZEPHRYHILLS, FL 33542

Current Mailing Address:

38135 MARKET SQUARE
ZEPHRYHILLS, FL 33542

FEI Number: 20-2384178

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARQUARDT, J. MATTHEW ESQ.
625 COURT ST., SUITE 200
CLEARWATER, FL 33756 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: J. MATTHEW MARQUARDT

02/27/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name HARPER, JOHN PRES.
Address 34902 GREENSTEELE ROAD
City-State-Zip: DADE CITY FL 33525

Title T
Name ALVAREZ, CHRISTIAN TREAS
Address 4130 WILDSTAR CIRCLE
City-State-Zip: WESLEY CHAPEL FL 33544

Title VP
Name FRAZIER , RAY VP
Address 3028 STONEGATE FALLS DRIVE
City-State-Zip: LAND O'LAKES FL 34638

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: CHRISTIAN ALVAREZ

TREAS.

02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date