

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000010764

**Entity Name:** FLORIDA HOSPITAL FLAGLER MEDICAL OFFICES  
ASSOCIATION, INC.

**Current Principal Place of Business:**

60 MEMORIAL MEDICAL PARKWAY  
PALM COAST, FL 32164

**Current Mailing Address:**

60 MEMORIAL MEDICAL PARKWAY  
PALM COAST, FL 32164 US

**FEI Number:** 26-2158309

**Certificate of Status Desired:** No

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

BROMME, JEFF  
900 HOPE WAY  
ALTAMONTE SPRINGS, FL 32714 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	DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	DOMAYER, CORY	Name	JIMENEZ, RONALD
Address	60 MEMORIAL MEDICAL PARKWAY	Address	60 MEMORIAL MEDICAL PARKWAY
City-State-Zip:	PALM COAST FL 32164	City-State-Zip:	PALM COAST FL 32164

*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:** DOMAYER , CORY

**DIRECTOR**

**06/22/2020**

Electronic Signature of Signing Officer/Director Detail

Date