

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003600

Entity Name: DADE COUNTY PODIATRIC MEDICAL ASSOCIATION, CORP

Current Principal Place of Business:

410 NORTH GADSDEN STREET
TALLAHASSEE, FL 32301

Current Mailing Address:

410 NORTH GADSDEN STREET
TALLAHASSEE, FL 32301 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WINN, JASON DAVID ESQ.
119 E PARK AVE
2-C
TALLAHASSEE, FL 32301 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: JASON D. WINN, ESQ

03/07/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, TR, VP
Name NELSON, PERCY L DR
Address 2630 NE 203RD STREET BISCAYNE
 BLVD
 SUITE 102
City-State-Zip: AVENTURA FL 33180

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: PERCY NELSON

PRESIDENT

03/07/2017

Electronic Signature of Signing Officer/Director Detail

Date