2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2023
Secretary of State
9932773523CC

DOCUMENT# N19000001857

Entity Name: POLK COUNTY PODIATRIC MEDICAL ASSOCIATION, INC

Current Principal Place of Business:

635 1ST STREET, NORTH
WINTER HAVEN, FL 33881

Current Mailing Address:

635 1ST STREET, NORTH
WINTER HAVEN, FL 33881

FEI Number: 83-2588343

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WINN, JASON D ESQ
2709 KILLARNEY WAY
SUITE 4
TALLAHASSEE, FL 32309 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	PRES	Title	VP
Name	KOON, JAMES E DPM	Name	ENGLERT, CHRISTOPHER M DPM
Address	635 1ST STREET, NORTH	Address	500 E CENTRAL AVE
City-State-Zip:	WINTER HAVEN FL 33881	City-State-Zip:	WINTER HAVEN FL 33880
Title	SEC	Title	TREASURER
Name	ODRO, MARVIN DPM	Name	DOPICO, JORGE DPM
Address	2939 S. FLORIDA AVE	Address	635 FIRST STREET NORTH
City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	WINTER HAVEN FL 33881

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: JAMES KOON PRESIDENT 04/11/2023

Electronic Signature of Signing Officer/Director Detail — Date