

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25556

Entity Name: SOUTHPARK MEDICAL ASSOCIATION, ST. AUGUSTINE OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

244 SOUTHPARK CIRCLE EAST
ST. AUGUSTINE, FL 32086

Current Mailing Address:

244 SOUTHPARK CIRCLE EAST
ST. AUGUSTINE, FL 32086 US

FEI Number: 59-2935392

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, JIGNESH
244 SOUTHPARK CIRCLE EAST
ST. AUGUSTINE, FL 32086 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: JIGNESH PATEL

04/28/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VPD	Title	PRESIDENT
Name	MALIK, AMIR M D	Name	PATEL, JIGNESH
Address	204 SOUTH PARK CIR E	Address	244 SOUTHPARK CIRCLE EAST
City-State-Zip:	ST. AUGUSTINE FL 32086	City-State-Zip:	ST AUGUSTINE FL 32086
Title	SECRETARY		
Name	BAILEY, JASON A		
Address	224 SOUTHPARK CIRCLE EAST		
City-State-Zip:	ST AUGUSTINE FL 32086		

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: JIGNESH PATEL

PRESIDENT

04/28/2019

Electronic Signature of Signing Officer/Director Detail

Date