

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 515371

**FILED
Jan 02, 2014
Secretary of State
CC0593291638**

Entity Name: ROGER G. VOELKER, MD, P. A.

Current Principal Place of Business:

400 N SUNSET BLVD
GULF BREEZE, FL 32561

Current Mailing Address:

400 N SUNSET BLVD
GULF BREEZE, FL 32561

FEI Number: 59-1696635

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VOELKER, ROGER G.
400 N SUNSET BLVD
GULF BREEZE, FL 32561 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 PD
Name VOELKER, ROGER G.
Address 400 N. SUNSET BLVD.
City-State-Zip: GULF BREEZE FL 32561-4060

Title ST
Name VOELKER, ROSEMARIE
Address 400 N. SUNSET BLVD.
City-State-Zip: GULF BREEZE FL 32561-4060

Title V
Name VOELKER, JASON P
Address 400 N SUNSET BLVD
City-State-Zip: GULF BREEZE FL 32561

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROGER VOELKER M.D.

PRESIDENT

01/02/2014

Electronic Signature of Signing Officer/Director Detail

Date