

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 523564

FILED
Jun 22, 2020
Secretary of State
1925363489CC

Entity Name: CLEARWATER CARDIOVASCULAR AND INTERVENTIONAL CONSULTANTS, M.D., P.A.

Current Principal Place of Business:

455 PINELLAS STREET
STE 400
CLEARWATER, FL 33756

Current Mailing Address:

455 PINELLAS STREET
STE 400
CLEARWATER, FL 33756 US

FEI Number: 59-1707138

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAVAS, JORGE DR.
224 OSCEOLA RD
BELLEAIR, FL 33756 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: JORGE P. NAVAS

06/22/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title AVP
Name SOLA, RICHARD MD
Address 5365 MIRA VISTA DRIVE
City-State-Zip: PALM HARBOR FL 34685

Title PRESIDENT
Name NAVAS, JORGE P. MD
Address 224 OSCEOLA ROAD
City-State-Zip: CLEARWATER FL 33756

Title AVP
Name PHILLIPS, PAUL L. MD
Address 34 NORTH PINE CIRCLE
City-State-Zip: CLEARWATER FL 33756

Title AVP
Name SPRIGGS, DOUGLAS J MD
Address 3771 MULLEN HURST DR
City-State-Zip: PALM HARBOR FL 34685

Title VP
Name STEIN, BERNARDO MD
Address 7893 BAYOU CLUB BLVD
City-State-Zip: SEMINOLE FL 33777

Title CEO
Name SIMMONS, JR, FREDERIC R
Address 5025 W. SAN MIGUEL
City-State-Zip: TAMPA FL 33629

Title AVP
Name LUCARELLA, MD, VANESSA J
Address 811 BAYVIEW DRIVE
City-State-Zip: CLEARWATER FL 33756

Title TREASURER
Name FERNANDEZ, MD, ALAND R
Address 1310 PRESERVATION WAY
City-State-Zip: OLDSMAR FL 34677

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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: FREDERIC R. SIMMONS, JR.

CEO

06/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title AVP
Name HAZLITT, MD, H. ANDREW
Address 2818 CHANCERY LANE
City-State-Zip: CLEARWATER FL 33759

Title SECRETARY
Name AMIN, MD, JAY K
Address 312 PONCE DE LEON BLVD
City-State-Zip: CLEARWATER FL 33756

Title AVP
Name HEPP, MD, MARK J
Address 3073 WOODSONG LANE
City-State-Zip: CLEARWATER FL 33761

Title AVP
Name BARRY, MD, MICHAEL O
Address 7896 LANTANA CREEK ROAD
City-State-Zip: SEMINOLE FL 33777

Title COO
Name RETCHLESS, KAREN
Address 316 BUTTONWOOD LANE
City-State-Zip: HARBOR BLUFFS FL 33770

Title AVP
Name DEWOLFE, ANDREW P
Address 11628 BRISTOL CHASE DR
City-State-Zip: TAMPA FL 33626

Title AVP
Name KIKTA, DONALD G DR.
Address 8 WESTWOOD LANE
City-State-Zip: CLEARWATER FL 33756

Title AVP
Name GRINGUT, SIMON A DR.
Address 68 BAYWOOD DR
City-State-Zip: SAFETY HARBOR FL 34695

Title AVP
Name PATEL, JAYENDRAKUMAR S DR.
Address 1553 RIVER DEE LANE
City-State-Zip: DUNEDIN FL 34698

Title AVP
Name SABATINO, MD, KENNETH C
Address 115 SHORE DRIVE
City-State-Zip: DUNEDIN FL 34698

Title AVP
Name ZELENKA, MD, JASON T
Address 14609 GALT LAKE DRIVE
City-State-Zip: TAMPA FL 33626

Title AVP
Name KING, MD, MARILYN Y
Address 100 OSCEOLA ROAD
City-State-Zip: CLEARWATER FL 33756

Title AVP
Name GILANI, MD, SYED MASOOD
Address 8893 SILVERTHORN ROAD
City-State-Zip: SEMINOLE FL 33777

Title CIO
Name KLEBER, CONNIE
Address 3941 VENETIAN WAY
City-State-Zip: TAMPA FL 33634

Title AVP
Name HAKKI, A-HAMID I DR.
Address 1508 STURBRIDGE COURT
City-State-Zip: DUNEDIN FL 34698

Title AVP
Name GARCIA-MORELL, JUAN
Address 140 WOODCREEK DR EAST
City-State-Zip: SAFETY HARBOR FL 34695

Title AVP
Name JESINGER, MICHAEL E DR.
Address 302 EASTLEIGH DRIVE
City-State-Zip: BELLEAIR FL 33756