

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 571839

Entity Name: PANAMA CITY UROLOGICAL CENTER, P.A.**Current Principal Place of Business:**500 W 11TH STREET
PANAMA CITY, FL 32401**Current Mailing Address:**500 W 11TH STREET
PANAMA CITY, FL 32401 US**FEI Number:** 59-1822901**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RAMOS, CARLOS E DR.
500 W 11TH STREET
PANAMA CITY, FL 32401 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:** CARLOS E. RAMOS

04/25/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	RAMOS, CARLOS E DR.
Address	500 W 11TH STREET
City-State-Zip:	PANAMA CITY FL 32401

Title	V
Name	HEALEY, DENIS E DR.
Address	500 W 11TH STREET
City-State-Zip:	PANAMA CITY FL 32401

Title	S
Name	JENKINS, MICHAEL A DR.
Address	500 W 11TH STREET
City-State-Zip:	PANAMA CITY FL 32401

Title	DIRECTOR
Name	HITT, WARREN T DR.
Address	500 W 11TH STREET
City-State-Zip:	PANAMA CITY FL 32401

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: CARLOS RAMOS

PRESIDENT

04/25/2022

Electronic Signature of Signing Officer/Director Detail

Date