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: MELANIE KUZMANICH

Electronic Signature of Signing Officer/Director Detail

SIGNATURE	E CINDY JOHNSTON			03/15/2022	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	VP/CHAIRMAN		
Name	DRUCKER, YOEL	Name	JOHNSTON, CINDY		
Address	1945 VERSAILLES ST	Address	1945 VERSAILLES ST		
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239		
Title	VP/SECRETARY/TREASURER				
Name	MANOHAR, JAISHREE DR.				
Address	1945 VERSAILLES ST				
City-State-Zip:	SARASOTA FL 34239				

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.

SARASOTA, FL 34239 US

Current Mailing Address:

1945 VERSAILLES ST

1945 VERSAILLES ST

SARASOTA. FL 34239 US

FEI Number: 59-1842511

Name and Address of Current Registered Agent:

JOHNSTON, CINDY A DR. 1945 VERSAILLES ST

SARASOTA, FL 34239

DOCUMENT# 578725

Entity Name: WEITZNER, M.D., YONKER, D.O. AND KAINE, M.D., P.A.

Current Principal Place of Business:

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

Date

03/15/2022

BUSINESS OPERATIONS

MANAGER

FILED Mar 15, 2022 Secretary of State 1384099201CC