2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2025
Secretary of State
3058161122CC

DOCUMENT# 600329

Entity Name: THE CARDIOVASCULAR CENTER, P.A.

Current Principal Place of Business:

910 WILLISTON PARK PT
SUITE #1000
LAKE MARY, FL 32746-2122

Current Mailing Address:

910 WILLISTON PARK PT
SUITE #1000
LAKE MARY, FL 32746-2122

FEI Number: 59-1197654

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALLARIO, LAWRENCE E.
910 WILLISTON PARK PT
STE 1000
LAKE MARY, FL 32746-2122 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	Title	VD
Name	VALLARIO, LAWRENCE	Name	DAVID, WILLIAM J
Address	350 EAGLE CREEK CIR	Address	303 S. DOVER CT.
City-State-Zip:	LAKE MARY FL 32746	City-State-Zip:	HEATHROW FL
Title	SD	Title	TD
Name	GRULLON, CARLOS P	Name	LOPEZ, WILBERTO
Address	789 HEATHER GLEN CIRLCE	Address	1656 CHERRY RIDGE DR
City-State-Zip:	LAKE MARY FL	City-State-Zip:	HEATHROW FL 32746

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: VALLARIO, LAWRENCE PD 04/21/2025

Electronic Signature of Signing Officer/Director Detail — Date