

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F22310

**Entity Name:** STEPHEN GELLER MD PA

**Current Principal Place of Business:**

3000 UNIVERSITY DRIVE , SUITE G  
% STEPHEN R. GELLER  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

3000 UNIVERSITY DRIVE , SUITE G  
% STEPHEN R. GELLER  
CORAL SPRINGS, FL 33065

**FEI Number:** 59-1913663

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GELLER, STEPHEN  
3000 UNIVERSITY DRIVE , SUITE G  
CORAL SPRINGS, FL 33065 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	SD
Name	GELLER, STEPHEN R.	Name	GELLER, BARBARA
Address	3000 UNIVERSITY DR., #G	Address	3000 UNIVERSITY DR., #G
City-State-Zip:	CORAL SPRINGS FL	City-State-Zip:	CORAL SPRINGS FL

*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:** STEPHEN R GELLER, M.D.

**PRESIDENT**

**07/07/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date