

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F46816

**Entity Name:** MARGARITA GELPI, M.D., P.A.

**Current Principal Place of Business:**

13701 BRUCE B DOWN BLVD  
SUITE 104  
TAMPA, FL 33613

**Current Mailing Address:**

13701 BRUCE B DOWN BLVD  
SUITE 104  
TAMPA, FL 33613

**FEI Number:** 59-2130813

**Certificate of Status Desired:** No

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

GELPI, MARGARITA, MD  
13701 BRUCE B DOWNS BLVD., SUITE 104  
TAMPA, FL 33613 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  
Name GELPI, MARGARITA  
Address 13701 BRUCE B DOWNS BLVD., #104  
City-State-Zip: TAMPA FL 33613

*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:** MARGARITA GELPI, M.C

**PRESIDENT**

**03/11/2014**

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

\_\_\_\_\_  
Date