## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F59792

Entity Name: RICHARD B. LEWIS, M.D., P.A.

**Current Principal Place of Business:** 

4913 NEW PROVIDENCE AVENUE

TAMPA, FL 33629

**Current Mailing Address:** 

4913 NEW PROVIDENCE AVENUE TAMPA, FL 33629 US

FEI Number: 59-2158531 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIS, RICHARD B 4913 NEW PROVIDENCE AVE TAMPA, FL 33629 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

**FILED** Jan 10, 2017

**Secretary of State** 

CC5825325071

## Officer/Director Detail:

Title

Name LEWIS, RICHARD B

Address 4913 NEW PROVIDENCE AVE.

City-State-Zip: TAMPA FL 33629

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.

**PRESIDENT** 

SIGNATURE: RICHARD B. LEWIS