

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G42772

**Entity Name:** FRANK X. VENZARA, M.D., P.A.

**Current Principal Place of Business:**

280 SYKES CREEK PKWY., STE. A  
MERRITT ISLAND, FL 32953

**Current Mailing Address:**

280 SYKES CREEK PKWY., STE. A  
MERRITT ISLAND, FL 32953

**FEI Number:** 59-2304451

**Certificate of Status Desired:** No

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

VENZARA, FRANK X  
255 STEWART DR  
MERRITT ISLAND, FL 32952 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 DR  
Name VENZARA, FRANK X  
Address 255 STEWART DR  
City-State-Zip: MERRITT ISL. 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:** FRANK VENZARA

**DOCTOR**

**02/11/2019**

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

\_\_\_\_\_  
Date