2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2018
Secretary of State
CC7208787167

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Entity Name: PULMONARY ASSOCIATES OF BRANDON, P.A.

Current Principal Place of Business:

910 OAKFIELD DRIVE
102
BRANDON, FL 33511

Current Mailing Address:

910 OAKFIELD DRIVE
102
BRANDON, FL 33511 US

FEI Number: 59-2508823

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWELL, RICHARD S.
910 OAKFIELD DRIVE
SUITE 102
BRANDON, FL 33511 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	POWELL, RICHARD S. M.D.
Address	910 OAKFIELD DRIVE, #102
City-State-Zip:	BRANDON FL

Title	VD
Name	LORCH, DANIEL G. M.D.
Address	910 OAKFIELD DRIVE, #102
City-State-Zip:	BRANDON FL

Title	SD
Name	HOOKER, THOMAS PD.O.
Address	910 OAKFIELD DRIVE #102
City-State-Zip:	BRANDON FL

Title	D
Name	GRAVES, ARTHUR EM.D.
Address	910 OAKFIELD DR. #102
City-State-Zip:	BRANDON FL 33511

Title	D
Name	SHAH, SUKETU KMD
Address	910 OAKFIELD DR. #102
City-State-Zip:	BRANDON FL 33511

Title	D
Name	GOMEZ, NELSON MD
Address	910 OAKFIELD DRIVE 102
City-State-Zip:	BRANDON FL 33511

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: RICHARD S POWELL PD 01/11/2018

Electronic Signature of Signing Officer/Director Detail — Date