

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H98999

Entity Name: OKALOOSA-WALTON UROLOGY, PA

Current Principal Place of Business:

% THOMAS D. ZACHOS
131 REDSTONE AVENUE, SUITE #102
CRESTVIEW, FL 32536

Current Mailing Address:

% THOMAS D. ZACHOS
4154 BEACH DR
NICEVILLE, FL 32578 US

FEI Number: 63-0782463

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZACHOS, THOMAS D., M.D.
4154 BEACH DRIVE
NICEVILLE, FL 32578 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 DP
Name ZACHOS, THOMAS D., M.D.
Address 4154 BEACH DRIVE
City-State-Zip: NICEVILLE 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: THOMAS D ZACHOS MD

DP

04/27/2018

Electronic Signature of Signing Officer/Director Detail

Date