

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K91810

Entity Name: ARTHRITIS SPECIALISTS, PA

Current Principal Place of Business:

3100 CORAL HILLS DRIVE
STE 302
CORAL SPRINGS, FL 33065

Current Mailing Address:

3100 CORAL HILLS DRIVE
STE 302
CORAL SPRINGS, FL 33065

FEI Number: 65-0127265

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATERS, BARRY KMD
1753 NW 126TH DRIVE
CORAL SPRINGS, FL 33071 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 PVTS
Name WATERS, BARRY KMD
Address 3100 CORAL HILLS DR STE 302
City-State-Zip: CORAL SPRINGS FL 33065

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: BARRY K WATERS

PRESIDENT

02/09/2014

Electronic Signature of Signing Officer/Director Detail

Date