

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K95697

Entity Name: INSTITUTE OF INTERVENTIONAL PAIN MANAGEMENT, P.A.

Current Principal Place of Business:

11319 CORTEZ BLVD.
BROOKSVILLE, FL 34613

Current Mailing Address:

11319 CORTEZ BLVD.
BROOKSVILLE, FL 34613

FEI Number: 59-2950096

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRACY, DEBORAH HMD
11319 CORTEZ BLVD
BROOKSVILLE, FL 34613 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 DO
Name TRACY, DEBORAH HMD
Address 11319 CORTEZ BLVD
City-State-Zip: BROOKSVILLE FL 34613

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: DEBORAH H TRACY, MD

PRESIDENT

01/15/2018

Electronic Signature of Signing Officer/Director Detail

Date