

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L05772

Entity Name: RHEUMATOLOGY ASSOCIATES OF CENTRAL FLORIDA, P.A.

Current Principal Place of Business:

3160 SOUTHGATE COMMERCE BLVD
STE 30
ORLANDO, FL 32806

Current Mailing Address:

3160 SOUTHGATE COMMERCE BLVD
STE 30
ORLANDO, FL 32806

FEI Number: 59-2958999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREEMAN, PAMELA GMD
3160 SOUTHGATE COMMERCE BLVD
STE 30
ORLANDO, FL 32806 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 PTD
Name FREEMAN, PAMELA GMD
Address 3160 SOUTHGATE COMMERCE BLVD
City-State-Zip: ORLANDO FL 32806

Title VPD
Name HASSELBRING, CARYN GMD
Address 3160 SOUTHGATE COMMERCE BLVD
City-State-Zip: ORLANDO FL 32806

Title SD
Name SUMMERS, LAURA BMD
Address 3160 SOUTHGATE COMMERCE BLVD
City-State-Zip: ORLANDO FL 32806

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: PAMELA FREEMAN

DIRECTOR

03/09/2023

Electronic Signature of Signing Officer/Director Detail

Date