## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L86811

Entity Name: REBEKAH RIVERS, P.A.

**Current Principal Place of Business:** 

1520 KILLEARN CENTER BLVD. SUITE 100 TALLAHASSEE, FL 32309-3702

## **Current Mailing Address:**

1520 KILLEARN CENTER BLVD. SUITE 100 TALLAHASSEE, FL 32309 US

FEI Number: 65-0213836 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RIVERS, REBEKAH 1520 KILLEARN CENTER BLVD. SUITE 100 TALLAHASSEE, FL 32309-3702 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

FILED Feb 11, 2025

**Secretary of State** 

1465117714CC

## Officer/Director Detail:

Title PRESIDENT Title VI

NameRIVERS, REBEKAHNameRIVERS, EUGENEAddressP O BOX 16607AddressP O BOX 16607

City-State-Zip: TALLAHASSEE FL 32317 City-State-Zip: TALLAHASSEE FL 32317

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.

**PRESIDENT** 

above, or on an attachment with all other like empowered SIGNATURE: REBEKAH RIVERS