## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000032947

Entity Name: JAMES J. MACOOL, M.D., P.A.

**Current Principal Place of Business:** 

765 DOUGLAS DR.

ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:** 

765 DOUGLAS DR.

ALTAMONTE SPRINGS. FL 32714 US

FEI Number: 59-3642489 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHAMS, SIDNEY H 1015 MAITLAND CENTER COMMONS BLVD SUITE 110 MAITLAND, FL 32751 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: SIDNEY H. SHAMS 02/23/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title M.D., PRESIDENT Title VICE-PRESIDENT

Name MACOOL, JAMES JAMEEL DR. Name MACOOL, HANNA MARK

Address 765 DOUGLAS DR. Address 765 DOUGLAS DR.

City-State-Zip: ALTAMONTE SPRINGS FL 32714 City-State-Zip: ALTAMONTE SPRINGS FL 32714

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: HANNA MARK MACOOL

VICE PRESIDENT

02/23/2018

FILED Feb 23, 2018

**Secretary of State** 

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