	ENE FL 32836 US			
FEI Number: 59-3685415		Certificate of Status Desired: Yes		
Name and A	Address of Current Registered Agent:			
KHAN, MARIA 8798 DARLENE ORLANDO, FL	DRIVE			
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	E: MARIA CRISTINA C. KHAN			02/02/2021
	Electronic Signature of Registered Agent			Date
Officer/Dire	<u> </u>			
<b>Officer/Dire</b> Title	<u> </u>	Title	VP	
	ctor Detail :	Title Name	VP KHAN, JAMIL H.	
Title	ctor Detail : PRES			
Title Name	<b>ctor Detail :</b> PRES KHAN, MARIA CRISTINA C.	Name	KHAN, JAMIL H. 8798 DARLENE DRIVE	
Title Name Address	ctor Detail : PRES KHAN, MARIA CRISTINA C. 8798 DARLENE DRIVE	Name Address	KHAN, JAMIL H. 8798 DARLENE DRIVE	
Title Name Address City-State-Zip:	ctor Detail : PRES KHAN, MARIA CRISTINA C. 8798 DARLENE DRIVE ORLANDO FL 32836	Name Address	KHAN, JAMIL H. 8798 DARLENE DRIVE	
Title Name Address City-State-Zip: Title	Ctor Detail : PRES KHAN, MARIA CRISTINA C. 8798 DARLENE DRIVE ORLANDO FL 32836 VP	Name Address	KHAN, JAMIL H. 8798 DARLENE DRIVE	

8798 DARI ENE

## 103 PARK PLACE BLVD

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115913

Entity Name: DAVENPORT PEDIATRICS, P.A.

## **Current Principal Place of Business:**

DAVENPORT, FL 33837

## **Current Mailing Address:**

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: EDWIN MICHAEL SIA

Electronic Signature of Signing Officer/Director Detail

FILED Feb 02, 2021 **Secretary of State** 9706962661CC

MD