

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000005503

Entity Name: JANET L. SEPER, M.D., P.A.

Current Principal Place of Business:

3000 MEDICAL PARK DR
SUITE 200
TAMPA, FL 33613

Current Mailing Address:

3000 MEDICAL PARK DR
SUITE 200
TAMPA, FL 33613 US

FEI Number: 59-3690673

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GASSMAN, ALAN SESQ
1245 COURT ST, STE 102
CLEARWATER, FL 33756 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 PD
Name SEPER, JANET LMD
Address 610 S. ROME AVE.
City-State-Zip: TAMPA FL 33606

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: JANET L SEPER, MD

OFFICER

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date