

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000017938

**Entity Name:** LUCITA M. CLERSAINT, DPM, P.A.

**Current Principal Place of Business:**

58 N.E. 167TH STREET  
MIAMI, FL 33162

**Current Mailing Address:**

P.O. BOX 277955  
MIRAMAR, FL 33027

**FEI Number:** 65-1077795

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CLERSAINT, LUCITA M DR.  
58 N.E. 167TH STREET  
MIAMI, FL 33162 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:** LUCITA M CLERSAINT, DPM

04/21/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DPM  
Name CLERSAINT, LUCITA M DR.  
Address P.O. BOX 277955  
City-State-Zip: MIRAMAR FL 33027

*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:** LUCITA M CLERSAINT, DPM

PODIATRIST - PRESIDENT 04/21/2016

Electronic Signature of Signing Officer/Director Detail

Date