## **2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000033053

Entity Name: DANIEL M. CALLOWAY, M.D., P.A.

**Current Principal Place of Business:** 

6000B-1 SAWGRASS VILLAGE CR PONTE VEDRA BEACH. FL 32082

**Current Mailing Address:** 

6000B-1 SAWGRASS VILLAGE CR PONTE VEDRA BEACH, FL 32082

FEI Number: 59-3710007 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALLOWAY, DANIEL M.D. 6000B-1 SAWGRASS VILLAGE CR PONTE VEDRA BEACH, FL 32082 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: DANIEL M CALLOWAY MD 01/08/2014

Electronic Signature of Registered Agent

Date

FILED Jan 08, 2014

**Secretary of State** 

CC8931731322

Officer/Director Detail:

Title DP

Name CALLOWAY, DANIEL MM.D.

Address 6000 B-1 SAWGRAS VILLAGE CIRCLE

City-State-Zip: PONTE VEDRA BEACH FL 32082

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: DANIEL M CALLOWAY

**MANAGER** 

01/08/2014

Date