

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000049517

**Entity Name:** RONALD CATHCART M.D., P.A.

**Current Principal Place of Business:**

170 HIGHWAY A1A, #207  
SATELLITE BEACH, FL 32937

**Current Mailing Address:**

170 HIGHWAY A1A, #207  
SATELLITE BEACH, FL 32937 US

**FEI Number:** 65-1130142

**Certificate of Status Desired:** No

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

CATHCART, RONALD  
170 HIGHWAY A1A  
APARTMENT 207  
SATELLITE, FL 32937 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 DR.  
Name CATHCART, RONALD  
Address 170 HIGHWAY A1A, #207  
City-State-Zip: SATELLITE BEACH FL 32937

*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:** RONALD CATHCART

**OWNER**

**01/08/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date