

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000051717

Entity Name: OBGYN ASSOCIATES OF ST. AUGUSTINE, P.A.**Current Principal Place of Business:**300 HEALTH PARK BLVD
STE 3002
SAINT AUGUSTINE, FL 32086**Current Mailing Address:**300 HEALTH PARK BLVD
STE 3002
SAINT AUGUSTINE, FL 32086 US**FEI Number:** 59-3718698**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PULSFUS, ERIC MD
300 HEALTH PARK BLVD., STE 3002
SAINT AUGUSTINE, FL 32086 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:** ERIC PULSFUS

01/04/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	PULSFUS, ERIC M.D.
Address	300 HEALTH PARK BLVD #3002
City-State-Zip:	SAINT AUGUSTINE FL 32086

Title	SECR
Name	SEARLE, THOMAS M.D.
Address	300 HEALTH PARK BLVD, #3002
City-State-Zip:	SAINT AUGUSTINE FL 32086

Title	VP
Name	JAGO, KELLY DR.
Address	300 HEALTH PARK BLVD STE 3002
City-State-Zip:	SAINT AUGUSTINE FL 32086

Title	TREASURER
Name	NEEDHAM, LAILA
Address	300 HEALTH PARK BLVD 3002
City-State-Zip:	ST AUGUSTINE FL 32086

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: ERIC PULSFUS

PRESIDENT

01/04/2022

Electronic Signature of Signing Officer/Director Detail

Date