

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000072503

**Entity Name:** FOOT AND ANKLE PHYSICIANS, P.A.

**Current Principal Place of Business:**

2350 SUNSET POINT ROAD  
SUITE A  
CLEARWATER, FL 33765

**Current Mailing Address:**

2350 SUNSET POINT ROAD  
SUITE A  
CLEARWATER, FL 33765

**FEI Number:** 59-3733310

**Certificate of Status Desired:** No

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

BERGER, TODD  
10225 ULMERTON ROAD  
SUITE 4A  
LARGO, FL 33771 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:** TODD BERGER

03/26/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P/D  
Name EDWARDS, ELIZABETH DR.  
Address 2350 SUNSET POINT ROAD  
SUITE A  
City-State-Zip: CLEARWATER FL 33765

Title VP/S  
Name EDWARDS, DUSTIN  
Address 2350 SUNSET POINT ROAD  
SUITE A  
City-State-Zip: CLEARWATER FL 33765

*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:** DUSTIN EDWARDS

VP/S

03/26/2018

Electronic Signature of Signing Officer/Director Detail

Date