

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076541

Entity Name: GINA SEVIGNY, M.D., P.A.

Current Principal Place of Business:

305 CLYDE MORRIS BLVD STE 150
ORMOND BEACH, FL 32174

Current Mailing Address:

1325 OAK FOREST DR
ORMOND BEACH, FL 32174

FEI Number: 59-3734457

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEVIGNY, GINA MMD
1325 OAK FOREST DR
ORMOND BEACH, FL 32174 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 SEVIGNY, GINA MMD
Address 1325 OAK FOREST DR
City-State-Zip: ORMOND BEACH FL 32174

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: GINA M. SEVIGNY, MD

PRES.

01/23/2018

Electronic Signature of Signing Officer/Director Detail

Date