

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032578

Entity Name: FIRST COAST CARDIOVASCULAR INSTITUTE, P.A.

Current Principal Place of Business:

3900 UNIVERSITY BOULEVARD SOUTH
JACKSONVILLE, FL 32216

Current Mailing Address:

3900 UNIVERSITY BOULEVARD SOUTH
JACKSONVILLE, FL 32216

FEI Number: 47-0854466

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GLAZIER & GLAZIER, P.A.
8825 PERIMETER PARK BLVD.
SUITE 504
JACKSONVILLE, FL 32216 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 PTD
Name KHATIB, YAZAN M.D.
Address 3900 UNIVERSITY BLVD SOUTH
City-State-Zip: JACKSONVILLE FL 32216

Title VPSD
Name ALI, VAQAR M.D.
Address 3900 UNIVERSITY BLVD SOUTH
City-State-Zip: JACKSONVILLE FL 32216

Title D
Name AL-SAGHIR, YOUSSEF M.D.
Address 3900 UNIVERSITY BLVD SOUTH
City-State-Zip: JACKSONVILLE FL 32216

Title DIRECTOR
Name ZUBERI, OMER MD
Address 3900 UNIVERSITY BLVD. SOUTH
City-State-Zip: JACKSONVILLE FL 32216

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: YAZAN KHATIB M.D.

PRESIDENT

04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date