

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000044270

Entity Name: SANDRA LAWRENCE M. D., P. A.

Current Principal Place of Business:

10903 TEA OLIVE LN
BOCA RATON, FL 33498

Current Mailing Address:

10903 TEA OLIVE LN
BOCA RATON, FL 33498

FEI Number: 65-1013279

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAWRENCE, SANDRA MD., PA
10903 TEA OLIVE LN
BOCA RATON, FL 33498 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 DP
Name LAWRENCE, SANDRA
Address 10903 TEA OLIVE LN
City-State-Zip: BOCA RATON FL 33498

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: SANDRA LAWRENCE MD

DIRECTOR

04/14/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date