## **2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000060822

Entity Name: LINDA MAYNARD, M.D., P.A.

**Current Principal Place of Business:** 

7320 E FLETCHER AVE TAMPA FL 33637

**Current Mailing Address:** 

7320 E FLETCHER AVE TAMPA FL 33637 US

FEI Number: 04-3679236 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAYNARD, LINDA M.D. 7320 E FLETCHER AVE TAMPA, FL 33637 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

FILED Apr 19, 2023

**Secretary of State** 

4668820896CC

Officer/Director Detail:

Title P Title VP, S

NameMAYNARD, LINDA M.D.NameMAYNARD, LINDA M.D.Address7320 E FLETCHER AVEAddress7320 E FLETCHER AVECity-State-Zip:TAMPA FL 33637City-State-Zip:TAMPA FL 33637

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: LINDA MAYNARD MD

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 04/19/2023

Date