

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000073242

**Entity Name:** CHAPEL PODIATRY & ASSOCIATES, P.A.

**Current Principal Place of Business:**

4191 MARINER BLVD  
SPRING HILL, FL 34609

**Current Mailing Address:**

4191 MARINER BLVD  
SPRING HILL, FL 34609

**FEI Number: 45-0482111**

**Certificate of Status Desired: No**

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

CHAPEL, CHARLES PDPM  
10360 DESERT SPARROW AVENUE  
WEEKI WACHEE, FL 34613 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 PVT  
Name CHAPEL, CHARLES P  
Address 10360 DESERT SPARROW AVENUE  
City-State-Zip: WEEKI WACHEE FL 34613

*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: CHARLES P. CHAPEL**

**PRESIDENT**

**03/07/2014**

Electronic Signature of Signing Officer/Director Detail

Date