

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078910

Entity Name: DOCTORS INLET PEDIATRICS AND PRIMARY CARE, P.A.

Current Principal Place of Business:

430 COLLEGE DRIVE
SUITE 100-102-104
MIDDLEBURG, FL 32068

Current Mailing Address:

430 COLLEGE DRIVE
SUITE 100-102-104
MIDDLEBURG, FL 32068

FEI Number: 14-1837982

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TILAK, SUWARNA M
8777 HAMPSHIRE GLEN DRIVE SOUTH
JACKSONVILLE, FL 32256 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 D
Name TILAK, SUWARNA MMD
Address 8777 HAMPSHIRE GLEN DRIVE
SOUTH
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name TILAK, MILIND VMD
Address 8777 HAMPSHIRE GLEN DRIVE
SOUTH
City-State-Zip: JACKSONVILLE FL 32256

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: SUWARNA TILAK

PRESIDENT

01/09/2013

Electronic Signature of Signing Officer/Director Detail

Date