

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117169

Entity Name: ALLIANCE PEDIATRICS, P.A.

Current Principal Place of Business:

4627 N.W. 53RD AVENUE
GAINESVILLE, FL 32653

Current Mailing Address:

4627 N.W. 53RD AVENUE
GAINESVILLE, FL 32653

FEI Number: 11-3658974

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SARANTOS, KATHERYN M.D.
4627 N.W. 53RD AVENUE
GAINESVILLE, FL 32653 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 MAS, OLGA M.D.
Address 4627 N.W. 53RD AVENUE
City-State-Zip: GAINESVILLE FL 32653

Title D
Name SARANTOS, KATHERYN M.D.
Address 4627 N.W. 53RD AVENUE
City-State-Zip: GAINESVILLE FL 32653

Title D
Name MASSIAS, MICHELLE MD
Address 4627 NW 53RD AVE
City-State-Zip: GAINESVILLE FL 32653

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: KATHERYN SARANTOS

D

01/20/2020

Electronic Signature of Signing Officer/Director Detail

Date