

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130552

Entity Name: SANDRA J. DOWNES, M.D., MPH, P.A.

Current Principal Place of Business:

3645 MADACA LANE
TAMPA, FL 33618

Current Mailing Address:

3645 MADACA LANE
TAMPA, FL 33618

FEI Number: 90-0056653

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOWNES, SANDRA JM.D.
3645 MADACA LANE
TAMPA, FL 33618 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 | Title | PSTD |
| Name | DOWNES, SANDRA JM.D. | Name | DOWNES, SANDRA JM.D. |
| Address | 3645 MADACA LANE | Address | 3645 MADACA LANE |
| City-State-Zip: | TAMPA FL 33618 | City-State-Zip: | TAMPA FL 33618 |

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 J. DOWNES

MD

05/01/2013

Electronic Signature of Signing Officer/Director Detail

Date