

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000134666

Entity Name: MICHAEL S. VARONE, M.D., P.A.

Current Principal Place of Business:

6919 DOMINION LANE
LAKEWOOD RANCH, FL 34202

Current Mailing Address:

6919 DOMINION LANE
LAKEWOOD RANCH, FL 34202 US

FEI Number: 14-1865043

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VARONE, MICHAEL S
6919 DOMINION LANE
LAKEWOOD RANCH, FL 34202 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 PS
Name VARONE, MICHAEL S MD
Address 6919 DOMINION LANE
City-State-Zip: BRADENTON FL 34202

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: MICHAEL S VARONE

PS

03/05/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date