

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086129

Entity Name: PAMELA PAPOLA, M.D. P.A.

Current Principal Place of Business:

3410 TAMIAMI TRAIL
SUITE 1
PORT CHARLOTTE, FL 33952

Current Mailing Address:

P.O. BOX 511896
PUNTA GORDA, FL 33951-1896

FEI Number: 20-0139306

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAPOLA, PAPOLA
3410 TAMIAMI TRAIL
SUITE 1
PORT CHARLOTTE, FL 33952 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 PSTD
Name PAPOLA, PAMELA
Address P.O. BOX 511896
City-State-Zip: PUNTA GORDA FL 33951-1896

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: PAMELA PAPOLA MD

MEDICAL DIRECTOR

01/27/2013

Electronic Signature of Signing Officer/Director Detail

Date