

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000153816

**Entity Name:** MICHAEL EDWARDS, P.A.

**Current Principal Place of Business:**

1860 SW FOUNTAINVIEW BOULEVARD  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

P.O. BOX 880965  
PORT ST. LUCIE, FL 34988 US

**FEI Number:** 20-0633372

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

EDWARDS, MICHAEL  
2802 S.W. BUENA VISTA DRIVE  
PALM CITY, FL 34990 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 P  
Name EDWARDS, MICHAEL  
Address 2802 S.W. BUENA VISTA DRIVE  
City-State-Zip: PALM CITY FL 34990

*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 EDWARDS

**PRESIDENT**

**01/31/2023**

Electronic Signature of Signing Officer/Director Detail

Date