

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000038336

Entity Name: PREMIER MILLER ORTHOPEDIC CENTERS, INC.

Current Principal Place of Business:

2904 W. COLUMBUS DRIVE
TAMPA, FL 33607

Current Mailing Address:

2904 W. COLUMBUS DRIVE
TAMPA, FL 33607 US

FEI Number: 90-0148327

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MILLER, JOHN D
7100 SUNSHINE SKYWAY LANE S.
208
ST. PETERSBURG, FL 33711 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/D
Name MILLER, JOHN D
Address 7100 SUNSHINE SKYWAY LANE S.
208
City-State-Zip: ST. PETERSBURG FL 33711

Title SECRETARY, DIRECTOR
Name MILLER, PATRICIA L
Address 7100 SUNSHINE SKYWAY LANE S.
208
City-State-Zip: ST. PETERSBURG FL 33711

Title VPD
Name MILLER, JOHN B
Address 25306 OAKS BLVD
City-State-Zip: LAND O LAKES FL 34639

Title TREASURER, DIRECTOR
Name MILLER, PATRICIA L
Address 7100 SUNSHINE SKYWAY LANE S.
208
City-State-Zip: ST. PETERSBURG FL 33711

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: JOHN D. MILLER

PRESIDENT

03/01/2016

Electronic Signature of Signing Officer/Director Detail

Date