

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000048241

Entity Name: C. LANCE KANE, M.D., P.A.

Current Principal Place of Business:

508 S HABANA AVE
SUITE 150
TAMPA, FL 33609

Current Mailing Address:

508 S HABANA AVE
SUITE 150
TAMPA, FL 33609

FEI Number: 20-2639649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KANE, C. LANCE
508 S HABANA AVE
SUITE 150
TAMPA, FL 33609 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
Name KANE, C. LANCE
Address 508 S HABANA AVE, SUITE 150
City-State-Zip: TAMPA FL 33609

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: C. LANCE KANE

DIRECTOR/PRES.

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date