

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000061840

Entity Name: CITRUS PARK MEDICAL CARE INC.

Current Principal Place of Business:

6328 GUNN HWY
B
TAMPA, FL 33625

Current Mailing Address:

6328 GUNN HWY
B
TAMPA, FL 33625

FEI Number: 86-1112772

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEHTA, SHITAL D.O.
6328 GUNN HWY
B
TAMPA, FL 33625 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 DO
Name MEHTA, SHITAL
Address 6328 GUNN HWY
City-State-Zip: TAMPA FL 33625

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: SHITAL MEHTA

OWNER

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date