

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000152777

Entity Name: FAMILY ALLERGY & ASTHMA CONSULTANTS, P.A.

Current Principal Place of Business:

4123 UNIVERSITY BLVD SOUTH
SUITE B
JACKSONVILLE, FL 32216

Current Mailing Address:

4123 UNIVERSITY BLVD SOUTH
SUITE B
JACKSONVILLE, FL 32216

FEI Number: 20-3802248

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NULAND, CHRISTOPHER L
1000 RIVERSIDE AVENUE
SUITE 115
JACKSONVILLE, FL 32204 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 PRESIDENT
Name JOSHI, SUNIL NMD
Address 4123 UNIVERSITY BLVD S, SUITE B
City-State-Zip: JACKSONVILLE FL 32216

Title VP
Name KATZ, HARY
Address 4123 UNIVERSITY BLVD. S.
 SUITE B
City-State-Zip: JACKSONVILLE FL 32216

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: SUNIL N JOSHI

PRESIDENT

01/22/2021

Electronic Signature of Signing Officer/Director Detail

Date