

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000158254

Entity Name: SHAUN E. LAURIE, M.D., PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

1628 NORTH PLAZA DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

3204 TALON COURT
TALLAHASSEE, FL 32309 US

FEI Number: 02-0760689

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAURIE, SHONNA B
3204 TALON COURT
TALLAHASSEE, FL 32309 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 DR.
Name LAURIE, SHAUN E
Address 3204 TALON COURT
City-State-Zip: TALLAHASSEE FL 32309

Title MRS.
Name LAURIE, SHONNA B
Address 3204 TALON COURT
City-State-Zip: TALLAHASSEE FL 32309

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: SHAUN E. LAURIE, MD

PHYSICIAN/OWNER

01/21/2016

Electronic Signature of Signing Officer/Director Detail

Date