

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055993

Entity Name: MORENO/JOSEPH, M.D., P.A.

Current Principal Place of Business:

4929 LYFORD CAY ROAD
TAMPA, FL 33629

Current Mailing Address:

4929 LYFORD CAY ROAD
TAMPA, FL 33629

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORENO, ANTHONY PMD
1800 MEASE DRIVE
SAFETY HARBOR, FL 34695 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 MORENO, ANTHONY PMD
Address 4929 LYFORD CAY ROAD
City-State-Zip: TAMPA FL 33629

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: MORENO ANTHONY P. M.D.

D

06/11/2014

Electronic Signature of Signing Officer/Director Detail

Date