

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000015399

**Entity Name:** MARCELLO A. BORZATTA, M.D., PA

**Current Principal Place of Business:**

2260 SO FERDON BLVD  
214  
CRESTVIEW, FL 32536

**Current Mailing Address:**

2260 SO FERDON BLVD  
214  
CRESTVIEW, FL 32536

**FEI Number:** 20-8441629

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FOSTER, WILLIAM S  
909 MAR WALT DRIVE  
1014  
FORT WALTON BEACH, FL 32547 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 P  
Name BORZATTA, MARCELLO A  
Address 2260 SO FERDON BLVD, SUITE 214  
City-State-Zip: CRESTVIEW FL 32536

Title S  
Name BORZATTA, MARCELLO A  
Address 2260 SO FERDON BLVD, SUITE 214  
City-State-Zip: CRESTVIEW FL 32536

Title T  
Name BORZATTA, MARCELLO A  
Address 2260 SO FERDON BLVD, SUITE 214  
City-State-Zip: CRESTVIEW FL 32536

*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:** MARCELLO BORZATTA

**PRESIDENT**

**01/19/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date