

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000046678

Entity Name: BROWN FERTILITY ASSOCIATES, P.A.**Current Principal Place of Business:**8149 POINT MEADOWS WAY
JACKSONVILLE , FL 32256**Current Mailing Address:**8149 POINT MEADOWS WAYT
JACKSONVILLE , FL 32256 US**FEI Number:** 20-8832347**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWN, SAMUEL E
8149 POINT MEADOWS WAY
JACKSONVILLE , FL 32256 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:** SAMUEL E BROWN MD

01/02/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	BROWN, SAMUEL ELBERT
Address	137 PLANTATION CIRCLE SOUTH
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	TREASURER
Name	VARZONI, JULIUS
Address	2872 PESCARA DR
City-State-Zip:	JACKSONVILLE FL 32246

Title	VP
Name	BROWN, JENNIFER DAVIS
Address	137 PLANTATION CIR S
City-State-Zip:	PONTE VEDRA BCH FL 32082

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: SAMUEL BROWN MD

PRESIDENT

01/02/2019

Electronic Signature of Signing Officer/Director Detail

Date