

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000103955

Entity Name: TRI COUNTY IPA, INC.

Current Principal Place of Business:

4849 LAKE WORTH ROAD
GREENACRES, FL 33463

Current Mailing Address:

4849 LAKE WORTH ROAD
GREENACRES, FL 33463

FEI Number: 26-3861919

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANNING, DENISE R
780 LYONS ROAD
WEST PALM BEACH, FL 33411 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 ABELLARD, DAVID M.D.
Address 4849 LAKE WORTH ROAD
City-State-Zip: GREENACRES FL 33463

Title VP
Name GAY, ALIX MD
Address 2600 VAN BUREN STREET
City-State-Zip: HOLLYWOOD FL 33020

Title T
Name BIEN-AIME, TONY MD
Address 19503 NW 57TH AVENUE, SUITE # A
City-State-Zip: MIAMI FL 33055

Title S
Name CUELLO-SUAREZ, ROSA MD
Address 2925 10TH AVENUE NORTH, SUITE #
202
City-State-Zip: LAKE WORTH FL 33461

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: ABELLARD DAVID

MD

01/17/2018

Electronic Signature of Signing Officer/Director Detail

Date