### 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000009899

Entity Name: NORTHPORT EMERGENCY ASSOCIATES, P.A.

FILED Feb 24, 2015 Secretary of State CC8243331661

## **Current Principal Place of Business:**

1700 S. TAMIAMI TRAIL SARASOTA, FL 34239

# **Current Mailing Address:**

P.O. BOX 25127

SARASOTA, FL 34277

FEI Number: 26-4153870 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

EMRICK, KIM 1700 S. TAMIAMI TRAIL SARASOTA, FL 34239 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: KIM EMRICK 02/24/2015

Electronic Signature of Registered Agent

Date

### Officer/Director Detail:

Title VP/D Title P/D

Name HOLLAND, REUBEN W Name GERBER, JOEL L

Address 1700 SOUTH TAMIAMI TRAIL Address 1700 SOUTH TAMIAMI TRAIL

City-State-Zip: SARASOTA FL 34239 City-State-Zip: SARASOTA FL 34239

Title S/D Title VP/D

Name JOHNSON, MARK Name NEWMAN, STEVEN R

Address 1700 SOUTH TAMIAMI TRAIL Address 1700 SOUTH TAMIAMI TRAIL

City-State-Zip: SARASOTA FL 34239 City-State-Zip: SARASOTA FL 34239

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: JOEL GERBER, MD

**PRESIDENT** 

02/24/2015