

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 23, 2016
Secretary of State
CC2911756877

Entity Name: FARID CHEKAOUI M.D., P.A.

Current Principal Place of Business:

BAY BREEZE NURSING & RETIREMENT CENTER
3387 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

Current Mailing Address:

BAY BREEZE NURSING & RETIREMENT CENTER
3387 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 US

FEI Number: 26-6463557

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHEKAOUI, FARID
BAY BREEZE NURSING & RETIREMENT CENTER
3387 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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 CHEKAOUI, FARID
Address BAY BREEZE NURSING & RETIREMENT CENTER
3387 GULF BREEZE PARKWAY
City-State-Zip: GULF BREEZE FL 32563

Title S
Name CHEKAOUI, ERIN L
Address 7 TOWN CENTER LOOP
City-State-Zip: SANTA ROSA BEACH FL 32459

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: FARID CHEKAOUI

P

01/23/2016

Electronic Signature of Signing Officer/Director Detail

Date