

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000041898

**Entity Name:** WANDA J. MORGAN, P.A.

**Current Principal Place of Business:**

128 JOHN KING RD  
STE. 14  
CRESTVIEW, FL 32539

**Current Mailing Address:**

128 JOHN KING RD  
STE. 14  
CRESTVIEW, FL 32539 US

**FEI Number:** 27-0149280

**Certificate of Status Desired:** No

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

MORGAN, WANDA J  
128 JOHN KING RD  
STE 14  
CRESTVIEW, FL 32539 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 MORGAN, WANDA J.  
Address 128 JOHN KING RD STE. 14  
City-State-Zip: CRESTVIEW FL 32539-5731

Title VP  
Name MORGAN, WANDA J.  
Address 128 JOHN KING RD STE. 14  
City-State-Zip: CRESTVIEW FL 32539-5731

Title T  
Name MORGAN, WANDA J.  
Address 128 JOHN KING RD STE. 14  
City-State-Zip: CRESTVIEW FL 32539

Title S  
Name MORGAN, WANDA J.  
Address 128 JOHN KING RD STE. 14  
City-State-Zip: CRESTVIEW FL 32539

*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:** WANDA J. MORGAN

**PRESIDENT**

**02/07/2024**

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

\_\_\_\_\_  
Date