

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000035159

Entity Name: SEBRING MEDICAL GROUP P.A.**Current Principal Place of Business:**2237 US 27 SOUTH
SEBRING, FL 33870**Current Mailing Address:**2237 US 27 SOUTH
SEBRING, FL 33870 US**FEI Number:** 27-2412037**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CF REGISTERED AGENT, INC.
100 S. ASHLEY DRIVE
SUITE 400
TAMPA, FL 33602 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:** RADHA V. BACHMAN

05/01/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	SIRACUSE, JOAN E. M.D.
Address	3081 LAKEVIEW DRIVE
City-State-Zip:	SEBRING FL 33870

Title	VP, DIRECTOR
Name	BENNETT, JENNIFER L. M.D.
Address	3778 ENCHANTED OAKS LANE
City-State-Zip:	SEBRING FL 33872

Title	SECRETARY, TREASURER, DIRECTOR
Name	PARNASSA, DANIEL T. M.D.
Address	1427 LAKESIDE WAY
City-State-Zip:	SEBRING FL 33876

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: JOAN SIRACUSE

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05/01/2016

Electronic Signature of Signing Officer/Director Detail

Date