

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000066574

Entity Name: DAVID M. MILLS, MD, FACS, P.A.

Current Principal Place of Business:

1300 SHORELINE DRIVE
#104
GULF BREEZE, FL 32561

Current Mailing Address:

1300 SHORELINE DRIVE
#104
GULF BREEZE, FL 32561 US

FEI Number: 80-0637615

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 DR
Name MILLS, DAVID M
Address 1300 SHORELINE DRIVE
#104
City-State-Zip: GULF BREEZE FL 32561

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: DAVID M MILLS

DR

04/01/2015

Electronic Signature of Signing Officer/Director Detail

Date