

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000020089

**Entity Name:** PATRICIA BEDOYA DPM PA

**Current Principal Place of Business:**

4895 WINDWARD PASSAGE DRIVE  
SUITE 7  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

4895 WINDWARD PASSAGE DRIVE  
SUITE 7  
BOYNTON BEACH, FL 33436 US

**FEI Number:** 45-5203261

**Certificate of Status Desired:** No

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

BEDOYA, PATRICIA  
4895 WINDWARD PASSAGE DRIVE  
SUITE 7  
BOYNTON BEACH, FL 33436 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            PRESIDENT  
Name            BEDOYA, PATRICIA  
Address        4895 WINDWARD PASSAGE DRIVE  
                  SUITE 7  
City-State-Zip: BOYNTON BEACH FL 33436

*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:** PATRICIA BEDOYA

**PRESIDENT**

**04/21/2014**

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

\_\_\_\_\_  
Date