## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000086935

Entity Name: THOMAS KEITH WALDRIP, P.A.

**Current Principal Place of Business:** 

3967 OAK STREET

JACKSONVILLE, FL 32205

**Current Mailing Address:** 

3967 OAK STREET

JACKSONVILLE, FL 32205

FEI Number: 20-1518613 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAYLOR, DEBORAH WESQUIRE 3991 ST. JOHNS AVE. JACKSONVILLE, FL 32205 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

FILED Jan 06, 2017

**Secretary of State** 

CC0021591450

## Officer/Director Detail:

Title F

Name WALDRIP, THOMAS K Address 3967 OAK STREET

City-State-Zip: JACKSONVILLE FL 32205

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: THOMAS K. WALDRIP

**PRESIDENT** 

01/06/2017

Electronic Signature of Signing Officer/Director Detail

Date