

2014 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

Officer/Director Detail :

Title P
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 KEITH WALDRIP

PRES

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date