

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000048837

**Entity Name:** AMBER NEWELL, D.O., P.A.

**Current Principal Place of Business:**

2939 ALGONQUIN AVE  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

2939 ALGONQUIN AVE  
JACKSONVILLE, FL 32210 US

**FEI Number:** 47-1218831

**Certificate of Status Desired:** No

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

SMITH HULSEY & BUSEY, PROFESSIONAL ASSOC.  
ONE INDEPENDENT DRIVE  
SUITE 3300  
JACKSONVILLE, FL 32202 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, SECRETARY,  
                      TREASURER  
Name            NEWELL, AMBER  
Address        2939 ALGONQUIN AVE  
City-State-Zip: JACKSONVILLE FL 32210

*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:** AMBER NEWELL

**PRESIDENT**

**01/29/2020**

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

\_\_\_\_\_ Date