

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000097044

Entity Name: EMERALD SHORES RHEUMATOLOGY INC

Current Principal Place of Business:

1290 WHISPER BAY BLVD
GULF BREEZE, FL 32563

Current Mailing Address:

2746 SUNRUNNER LANE
GULF BREEZE, FL 32563

FEI Number: 47-2491685

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BROWN, RACHEL W
1290 WHISPER BAY BLVD
GULF BREEZE, FL 32563 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: RACHEL BROWN

02/03/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name BROWN, RACHEL W
Address 2746 SUNRUNNER LANE
City-State-Zip: GULF BREEZE FL 32563

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: RACHEL BROWN

**OWNER/REGISTERED
AGENT**

02/03/2022

Electronic Signature of Signing Officer/Director Detail

Date