

**2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P14000100276

**Entity Name:** EMEKA J. OKOLI, M.D., P.A.

**Current Principal Place of Business:**

569 EAST KESLEY LANE  
SAINT JOHNS, FL 32259

**Current Mailing Address:**

569 EAST KESLEY LANE  
SAINT JOHNS, FL 32259 US

**FEI Number:** 47-2630847

**Certificate of Status Desired:** No

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

FARAH LAW  
6550 ST. AUGUSTINE ROAD  
SUITE 103  
JACKSONVILLE, FL 32217 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:** OKOLI, EMEKA /JEF

08/17/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, SECRETARY,  
                     TREASURER, DIRECTOR  
Name            OKOLI, EMEKA J M.D.  
Address        569 EAST KESLEY LANE  
City-State-Zip: SAINT JOHNS FL 32259

*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:** OKOLI, EMEKA /JEF

PRES

08/17/2023

Electronic Signature of Signing Officer/Director Detail

Date