### 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000030788

Entity Name: ARCADIAN TELEPSYCHIATRY FLORIDA P.A.

**FILED** Jan 18, 2023 **Secretary of State** 0654388079CC

## **Current Principal Place of Business:**

141 PARKER STREET SUITE 306

MAYNARD, MA 01754

# **Current Mailing Address:**

141 PARKER STREET SUITE 306 MAYNARD, MA 01754 US

FEI Number: 82-4957103 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR. SUITE A

TALLAHASSEE, FL 32301 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: JACLYN WRIGHT ASSISTANT SECRETARY

01/18/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title Title Ρ

Name ANDERSON, MICHAEL MD Name ANDERSON, MICHAEL MD

141 PARKER STREET 141 PARKER STREET Address Address

SUITE 306 SUITE 306

City-State-Zip: MAYNARD MA 01754 City-State-Zip: MAYNARD MA 01754

Title S Title Т

Name ANDERSON, MICHAEL MD Name ANDESON, MICHAEL MD

141 PARKER STREET Address 141 PARKER STREET Address

> SUITE 306 SUITE 306

City-State-Zip: MAYNARD MA 01754 City-State-Zip: MAYNARD MA 01754

Title **AUTHORIZED MANAGER** HERGUTH, PATRICK Name 141 PARKER STREET Address

SUITE 306

City-State-Zip: MAYNARD MA 01754

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: MICHAEL ANDERSON, M.D.

**PRESIDENT** 

01/18/2023