

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000046858

Entity Name: JOHN PAUL ARNOLD, M.D., P.A.

Current Principal Place of Business:

148 SOUTHERLY LANE
FLEMING ISLAND, FL 32003

Current Mailing Address:

148 SOUTHERLY LANE
FLEMING ISLAND, FL 32003

FEI Number: 83-0656934

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDAGENT.COM, INC.
1543 KINGSLEY AVE STE 5
ORANGE PARK, FL 32073 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 DPS
Name ARNOLD, JOHN P M.D.
Address 148 SOUTHERLY LANE
City-State-Zip: FLEMING ISLAND FL 32003

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: JOHN P. ARNOLD, M.D.

DIRECTOR

02/02/2019

Electronic Signature of Signing Officer/Director Detail

Date