

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000061167

Entity Name: JANELLE MCCALL, M.D., P.A.

Current Principal Place of Business:

2323 SMULLIAN TRAIL NORTH
JACKSONVILLE, FL 32217

Current Mailing Address:

2323 SMULLIAN TRAIL NORTH
JACKSONVILLE, FL 32217 US

FEI Number: 87-1668545

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH HULSEY & BUSEY, PROFESSIONAL ASSOCIA
TION
ONE INDEPENDENT DRIVE, STE 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 PTS
Name MCCALL, JANELLE
Address 2323 SMULLIAN TRAIL NORTH
City-State-Zip: JACKSONVILLE FL 32217

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: JANELLE MCCALL

PTS

04/06/2023

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date