

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000033311

Entity Name: PEDIATRIC EMERGENCY PHYSICIANS OF ST. PETERSBURG,
P.A.

FILED
Apr 12, 2017
Secretary of State
CC0497236710

Current Principal Place of Business:

5870 NORTH HIATUS ROAD, SUITE 200
TAMARAC, FL 33321

Current Mailing Address:

265 BROOKVIEW CENTRE WAY, SUITE 400
ATTN: KELLY GREANEY
KNOXVILLE, TN 37919 US

FEI Number: 65-0410357

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PSTD
Name HOLTZCLAW, STEPHEN M.D
Address 265 BROOKVIEW CENTRE WAY,
SUITE 400
City-State-Zip: KNOXVILLE TN 37919

Title AS
Name STAIR, JOHN
Address 265 BROOKVIEW CENTRE WAY,
SUITE 400
City-State-Zip: KNOXVILLE TN 37919

Title AT
Name BARRACK, JOHN
Address 265 BROOKVIEW CENTRE WAY,
SUITE 400
City-State-Zip: KNOXVILLE TN 37919

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 R. STAIR

ASSISTANT SECRETARY 04/12/2017

Electronic Signature of Signing Officer/Director Detail

Date