

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000075997

**Entity Name:** D.E. NOBLE, M.D., P.A.

**Current Principal Place of Business:**

509 S.E. RIVERSIDE DRIVE  
SUITE 202  
STUART, FL 34994

**Current Mailing Address:**

509 S.E. RIVERSIDE DRIVE  
SUITE 202  
STUART, FL 34994 US

**FEI Number:** 65-0442827

**Certificate of Status Desired:** No

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

FOX, M. LANNING  
3473 SE WILLOUGHBY BLVD  
STUART, FL 34994 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 PSD  
Name NOBLE, DONALD E  
Address 2528 BROOKWOOD LANE  
City-State-Zip: PALM CITY FL 34990

*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:** DONALD E. NOBLE

PSD

01/27/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date