

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000076634

**Entity Name:** MEDICAL ASSOCIATES OF CENTRAL FLORIDA, P.A.

**Current Principal Place of Business:**

1110 DRUID CIRCLE  
LAKE WALES, FL 33853

**Current Mailing Address:**

1110 DRUID CIRCLE  
LAKE WALES, FL 33853 US

**FEI Number:** 59-3202432

**Certificate of Status Desired:** No

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

ALLAM, MAHESH G DR.  
2418 WILDWOOD COURT  
WINTER HAVEN, FL 33884 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:** MAHESH G ALLAM MD

01/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, CHAIRMAN  
Name            ALLAM, MAHESH DR.  
Address          2418 WILDWOOD COURT  
City-State-Zip: WINTER HAVEN FL 33884

Title            VC  
Name            ASHMAN-ALLAM, TANIA CAMILLE  
Address          2418 WILDWOOD COURT  
City-State-Zip: WINTER HAVEN FL 33884

*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:** MAHESH ALLAM MD

PRESIDENT

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date