

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000058641

Entity Name: MICHAEL D. FOX, M.D., P.A.

Current Principal Place of Business:

7051 SOUTHPOINT PARKWAY
SUITE 200
JACKSONVILLE, FL 32216-8713

Current Mailing Address:

7051 SOUTHPOINT PARKWAY
SUITE 200
JACKSONVILLE, FL 32216-8713 US

FEI Number: 59-3266298

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOX, MICHAEL DMD
7051 SOUTHPOINT PARKWAY
SUITE 200
JACKSONVILLE, FL 32216-8713 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 DR
Name FOX, MICHAEL DMD
Address 7051 SOUTHPOINT PARKWAY SUITE
200
City-State-Zip: JACKSONVILLE FL 32216-8713

Title DR
Name LIPARI, CHRISTOPHER WMD
Address 7051 SOUTHPOINT PARKWAY SUITE
200
City-State-Zip: JACKSONVILLE FL 32216-8713

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: MICHAEL D FOX

PRESIDENT

01/21/2013

Electronic Signature of Signing Officer/Director Detail

Date