## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P9500000124

Entity Name: ROBERT FELDMAN, M.D., P.A.

**Current Principal Place of Business:** 

125 SW 11TH STREET OCALA, FL 34471

**Current Mailing Address:** 

**PO BOX 516** 

OCALA, FL 34478 US

FEI Number: 59-3284884 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHATT, J. THEODORE 328 NE 1ST AVE SUITE 100 OCALA, FL 34470 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: J. THEODORE SCHATT 03/10/2015

Electronic Signature of Registered Agent

Date

FILED Mar 10, 2015

**Secretary of State** 

CC1533858401

## Officer/Director Detail:

Title P

Name FELDMAN, ROBERT L M.D.
Address 125 SW 11TH STREET
City-State-Zip: OCALA FL 34471

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.