

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000008295

Entity Name: ARSENIA P. ALIGNAY, M.D., P.A.

Current Principal Place of Business:

905 CASSAT AVENUE
JACKSONVILLE, FL 32205

Current Mailing Address:

905 CASSAT AVENUE
JACKSONVILLE, FL 32205

FEI Number: 59-3298732

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALIGNAY, ARSENIA PMD
905 CASSAT AVENUE
JACKSONVILLE, FL 32205 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 DP
Name ALIGNAY, ARSENIA P
Address 3305 US HWY 17 SOUTH
City-State-Zip: ORANGE PARK FL 32003

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: ARSENIA P ALIGNAY

MD

04/26/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date