

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000028026

Entity Name: FACULTY PRACTICE SERVICES (FLA.) INC.

Current Principal Place of Business:

3445 SOUTH DIXIE DR.
DAYTON, OH 45439

Current Mailing Address:

3445 SOUTH DIXIE DR.
DAYTON, OH 45439 US

FEI Number: 65-0574855

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUAREQUIO, MICHAEL
320 SE 11 STREET
FORT LAUDERDALE, FL 33316 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 D
Name REITER, BARRY S
Address ONE BANKSVILLE ROAD
City-State-Zip: ARMONK NY 10504

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: BARRY REITER

PRESIDENT

02/17/2019

Electronic Signature of Signing Officer/Director Detail

Date