# 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: KEITH MOORE

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

# 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P96000056710

Entity Name: GASTROENTEROLOGY CONSULTANTS OF CENTRAL FLORIDA, P.A.

#### Current Principal Place of Business:

10800 DYLAN LOREN CIRCLE STE 102 ORLANDO, FL 32825

# **Current Mailing Address:**

10800 DYLAN LOREN CIRCLE STE 102 ORLANDO, FL 32825 US

# FEI Number: 59-3385912

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

GASSMAN, ALAN S 1245 COURT STREET CLEARWATER, FL 33756 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	P	Title	VT
Name	MOORE, KEITH	Name	SHAIKH, ANIQ
Address	10800 DYLAN LOREN CIRCLE STE 102	Address	10800 DYLAN LOREN CIRCLE STE 102
City-State-Zip:	ORLANDO FL 32825	City-State-Zip:	ORLANDO FL 32825

# Certificate of Status Desired: No

FILED May 28, 2020 Secretary of State 2252495580CC

> 05/28/2020 Date