

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000090532

Entity Name: STACI APPLETON, M.D., P.A.

Current Principal Place of Business:

405 DOWNING STREET
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

P.O. BOX 278
NEW SMYRNA BEACH, FL 32170 US

FEI Number: 59-3409242

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLETON, STACI M.D.
405 DOWNING STREET
NEW SMYRNA BEACH, FL 32168 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: TANYA M. PLAUT, ESQUIRE

04/04/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name APPLETON, STACI M.D.
Address POST OFFICE BOX 278
City-State-Zip: NEW SMYRNA BEACH FL 32170

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: STACI APPLETON

PRESIDENT

04/04/2017

Electronic Signature of Signing Officer/Director Detail

Date