

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000046779

**Entity Name:** JOHN J. DABROWSKI, PH.D., P.A.

**Current Principal Place of Business:**

13357 NORTH 56TH ST  
TAMPA, FL 33617

**Current Mailing Address:**

13357 NORTH 56TH ST  
TAMPA, FL 33617

**FEI Number:** 59-3448924

**Certificate of Status Desired:** Yes

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

STULL, R JESQ.  
602 SOUTH BLVD.  
TAMPA, FL 33606 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                   | Title           | PVTS                |
| Name            | DABROWSKI, JOHN J   | Name            | DABROWSKI, JOHN J   |
| Address         | 13357 NORTH 56TH ST | Address         | 13357 NORTH 56TH ST |
| City-State-Zip: | TAMPA FL 33617      | City-State-Zip: | TAMPA FL 33617      |

*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:** JOHN J DABROWSKI PHD

**PRESIDENT**

**02/26/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date