

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000047606

**Entity Name:** PAUL R. LEVINE, M.D., P.A.

**Current Principal Place of Business:**

505 OAKFIELD DRIVE  
BRANDON, FL 33511

**Current Mailing Address:**

505 OAKFIELD DRIVE  
BRANDON, FL 33511

**FEI Number: 59-3446043**

**Certificate of Status Desired: No**

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

LEVINE, JONAH M  
505 OAKFIELD DRIVE  
BRANDON, FL 33511 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:** JONAH M. LEVINE

01/13/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSD  
Name LEVINE, PAUL R  
Address 505 OAKFIELD DRIVE  
City-State-Zip: BRANDON FL 33511

*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:** PAUL R. LEVINE

PRESIDENT

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date