

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000084436

Entity Name: THOMAS M. KERR, M.D., P.A.

Current Principal Place of Business:

2809 W. WATERS AVE.
TAMPA, FL 33614

Current Mailing Address:

19185 NORTH DALE MABRY HWY
LUTZ, FL 33548 US

FEI Number: 59-3422525

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROMM, JOSEPH
5135 W. CYPRESS STREET
SUITE 104
TAMPA, FL 33607 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 PRES
Name KERR, THOMAS M
Address 2809 W. WATERS AVE.
City-State-Zip: TAMPA FL 33614

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: THOMAS M KERR

MGMB

04/21/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date