

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000087985

Entity Name: RONALD M. KIRSNER, M.D., P.A.

Current Principal Place of Business:

9822 TAPESTRY PARK CIRCLE
UNIT #206
JACKSONVILLE, FL 32246

Current Mailing Address:

9822 TAPESTRY PARK CIRCLE
UNIT #206
JACKSONVILLE, FL 32246

FEI Number: 59-3487152

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIRSNER, RONALD M
9822 TAPESTRY PARK CIRCLE
UNIT #206
JACKSONVILLE, FL 32246 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
Name KIRSNER, RONALD M
Address 9822 TAPESTRY PARK CIRCLE UNIT
#206
City-State-Zip: JACKSONVILLE FL 32246

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: RONALD M. KIRSNER.M.D., P.A.

MEDICAL DIRECTOR

04/29/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date