Current Pri 3340 TAMIAMI	e: CHARLOTTE CARDIAC RESEARCH CENT ncipal Place of Business: TRAIL DTTE, FL 33952	ER, INC.	3671537	
Current Ma	iling Address:			
3340 TAMIA PORT CHAI	MI TRAIL RLOTTE, FL 33952 US			
FEI Number: 65-0802826 Certificate of Status De			red: No	
Name and A	Address of Current Registered Agent:			
HOLMES, DAV 99 NESBIT ST. PUNTA GORD				
99 NESBIT ST. PUNTA GORD		stered office or regis	tered agent, or both, in the State of Flo	rida.
99 NESBIT ST. PUNTA GORD	A, FL 33950 US	stered office or regis	tered agent, or both, in the State of Flo	rida. 02/26/2020
99 NESBIT ST. PUNTA GORD	A, FL 33950 US d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of Flo	
99 NESBIT ST. PUNTA GORD The above name SIGNATURI	A, FL 33950 US d entity submits this statement for the purpose of changing its regines: DAVID A. HOLMES	stered office or regis	tered agent, or both, in the State of Flo	02/26/2020
99 NESBIT ST. PUNTA GORD The above name SIGNATURI	A, FL 33950 US d entity submits this statement for the purpose of changing its regi E: DAVID A. HOLMES Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flo	02/26/2020
99 NESBIT ST. PUNTA GORD The above name SIGNATURI Officer/Dire	A, FL 33950 US d entity submits this statement for the purpose of changing its regines: DAVID A. HOLMES Electronic Signature of Registered Agent Agent Competail :			02/26/2020
99 NESBIT ST. PUNTA GORD The above name SIGNATURI Officer/Dire Title	A, FL 33950 US d entity submits this statement for the purpose of changing its regi E: DAVID A. HOLMES Electronic Signature of Registered Agent Ctor Detail : PD	Title	VP, DIRECTOR	02/26/2020
99 NESBIT ST. PUNTA GORD The above name SIGNATURI Officer/Dire Title Name	A, FL 33950 US d entity submits this statement for the purpose of changing its regi E DAVID A. HOLMES Electronic Signature of Registered Agent Ctor Detail : PD LOPEZ, MARIO 3340 TAMIAMI TRAIL	Title Name	VP, DIRECTOR CONNELLY, TERENCE P DR. 3340 TAMIAMI TRAIL	02/26/2020
99 NESBIT ST. PUNTA GORD The above name SIGNATURI Officer/Dire Title Name Address	A, FL 33950 US d entity submits this statement for the purpose of changing its regi E DAVID A. HOLMES Electronic Signature of Registered Agent Ctor Detail : PD LOPEZ, MARIO 3340 TAMIAMI TRAIL	Title Name Address	VP, DIRECTOR CONNELLY, TERENCE P DR. 3340 TAMIAMI TRAIL	02/26/2020

Address

City-State-Zip:

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: MARIO LOPEZ

Address

3340 TAMIAMI TRAIL

City-State-Zip: PORT CHARLOTTE FL 33952

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

3340 TAMIAMI TRAIL

PORT CHARLOTTE FL 33952

02/26/2020

FILED Feb 26, 2020

**Secretary of State** 

Date

## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000108755

## Entity Name: CHARLOTTE CARDIAC RESEARCH CENTER, INC.