

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000068232

**Entity Name:** JORGE A. AGUILAR, M.D., P.A.

**Current Principal Place of Business:**

905 BEACH BLVD  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

905 BEACH BLVD  
JACKSONVILLE BEACH, FL 32250

**FEI Number:** 59-3527425

**Certificate of Status Desired:** No

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

HOOD, TERRY  
427 NORTH 3RD STREET  
JACKSONVILLE BEACH, FL 32250 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 DP  
Name AGUILAR, JORGE A  
Address 1108 SALT CREEK DR  
City-State-Zip: PONTE VEDRA BEACH FL 32082

*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:** JORGE A. AGUILAR

**PRESIDENT**

**04/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date