

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000026824

Entity Name: COMMUNITY PODIATRY & WOUND CARE, P.A.

Current Principal Place of Business:

6 ST. JOHNS MEDICAL PARK DRIVE
ST. AUGUSTINE, FL 32086

Current Mailing Address:

6 ST. JOHNS MEDICAL PARK DRIVE
ST. AUGUSTINE, FL 32086 US

FEI Number: 59-3554924

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ, ROSANA DPM
6 ST JOHNS MEDICAL PARK DRIVE
ST. AUGUSTINE, FL 32086 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 P
Name RODRIGUEZ, ROSANA DPM
Address 6 ST. JOHNS MEDICAL PARK DRIVE
City-State-Zip: ST AUGUSTINE FL 32086

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: RODRIGUEZ, ROSANA DPM

P

03/20/2013

Electronic Signature of Signing Officer/Director Detail

Date