

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000065584

Entity Name: PIERRE GIRARD, M.D., P.A.

Current Principal Place of Business:

621 SE PORT ST LUCIE BLVD
PORT SAINT LUCIE, FL 34984

Current Mailing Address:

621 SE PORT ST LUCIE BLVD
PORT SAINT LUCIE, FL 34984 US

FEI Number: 65-0936633

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSILLO, ROBERT AESQ.
501 SEA OATS DR. SUITE A-1
JUNO BEACH, FL 33408 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 GIRARD, PIERRE M.D.
Address 621 SE PORT ST. LUCIE BLVD.
City-State-Zip: PORT SAINT LUCIE FL 34984

Title CPA
Name STUMP, MITCHELL L
Address 26 PRINCEWOOD LANE
City-State-Zip: PALM BEACH GARDENS FL 33410

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: MITCHELL STUMP

CPA

01/24/2016

Electronic Signature of Signing Officer/Director Detail

Date