

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000095078

**Entity Name:** ALAN M. JONES, O.D., P.A.

**Current Principal Place of Business:**

4851 WEST HILLSBORO BLVD  
A-6  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4851 WEST HILLSBORO BLVD  
A-6  
COCONUT CREEK, FL 33073

**FEI Number:** 65-0984204

**Certificate of Status Desired:** No

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

HEFFNER, ADAM ESQ.  
1900 NW CORPORATE BLVD - SUITE 301  
WEST BUILDING  
BOCA RATON, FL 33431 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 OD  
Name JONES, ALAN  
Address 4851 WEST HILLSBORO BLVD A-6  
City-State-Zip: COCONUT CREEK FL 33073

Title VT  
Name JONES, SHERYL A  
Address 3770 KINGS WAY  
City-State-Zip: BOCA RATON FL 33434

Title D  
Name SHIELDS, GAYLE L.  
Address 4851 WEST HILLSBORO BLVD  
A-6  
City-State-Zip: COCONUT CREEK FL 33073

*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:** SHERYL JONES

**OFFICE MANAGER**

**01/09/2018**

Electronic Signature of Signing Officer/Director Detail

Date