2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2018
Secretary of State
CC2484996248

DOCUMENT# P99000110146

Entity Name: STARKE FAMILY MEDICAL CENTER, INC.

Current Principal Place of Business:

345 W MADISON ST
STARKE, FL 32091

Current Mailing Address:

345 W MADISON ST
STARKE, FL 32091

FEI Number: 59-3614870

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIKES, WALTER DAVID JR DC
345 W MADISON STREET
STARKE, FL 32091 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	DR
Name	SIKES, WALTER DJR DC
Address	345 W MADISON ST
City-State-Zip:	STARKE FL 32091

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: WALTER DAVID SIKES, JR, D.C. OWNER 01/10/2018

Electronic Signature of Signing Officer/Director Detail — Date