

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S08843

Entity Name: MY DOCTOR, P.A.

Current Principal Place of Business:

1200 SOUTH MAIN STREET
SUITE 200
BELLE GLADE, FL 33430

Current Mailing Address:

1200 SOUTH MAIN STREET
SUITE 200
BELLE GLADE, FL 33430 US

FEI Number: 65-0217699

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HARLAND, MARTIN T.
1200 SOUTH MAIN STREET
SUITE 200
BELLE GLADE, FL 33430-4997 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 DPS
Name HARLAND, MARTIN T.
Address 1200 SOUTH MAIN STREET 200
City-State-Zip: BELLE GLADE FL 33430

Title T
Name HARLAND, MARTIN T.
Address 1200 SOUTH MAIN STREET 200
City-State-Zip: BELLE GLADE FL 33430

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: MARTIN T HARLAND

PRES/CEO

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date