

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S12546

**Entity Name:** OAKWOOD LAKES PODIATRY GROUP, P.A.

**Current Principal Place of Business:**

3695 BOYNTON BEACH BLVD  
SUITE 4  
BOYNTON BEACH, FL 33436

**Current Mailing Address:**

3695 BOYNTON BEACH BLVD  
SUITE 4  
BOYNTON BEACH, FL 33436

**FEI Number:** 65-0225866

**Certificate of Status Desired:** No

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

FRIEDMAN, HOWARD S.  
116 SE 6TH COURT  
SUITE 700  
FT LAUDERDALE, FL 33301 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            PRES  
Name            MATTISON, BRAD S., DR.  
Address        3695 BOYNTON BCH BVD #4  
City-State-Zip: BOYNTON BEACH FL 33436

Title            VP  
Name            MATTISON, SUSAN B., DR.  
Address        3695 BOYNTON BCH BVD #4  
City-State-Zip: BOYNTON BEACH FL 33436

*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:** SUSAN MATTISON

**DIRECTOR**

**04/25/2014**

Electronic Signature of Signing Officer/Director Detail

Date