

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S20408

**Entity Name:** CHRISTOPHER M. DAVEY, M.D., P.A.

**Current Principal Place of Business:**

C/O GEORGE RAHDERT  
535 CENTRAL AVENUE  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

C/O GEORGE RAHDERT  
535 CENTRAL AVENUE  
ST PETERSBURG, FL 33701 US

**FEI Number:** 65-0232527

**Certificate of Status Desired:** No

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

DAVEY, CHRISTOPHER M  
C/O GEORGE RAHDERT  
535 CENTRAL AVENUE  
ST PETERSBURG, FL 33701 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            DAVEY, CHRISTOPHER M DR.  
Address        C/O GEORGE RAHDERT  
                  535 CENTRAL AVENUE  
City-State-Zip: ST PETERSBURG FL 33701

*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:** CHRISTOPHER DAVEY

**PRES**

**04/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date