

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S24521

Entity Name: CHRISS & ASSOCIATES, M.D., P.A.**Current Principal Place of Business:**1925 MIZELL AVE.
SUITE 302
WINTER PARK, FL 32792**Current Mailing Address:**1925 MIZELL AVE.
SUITE 302
WINTER PARK, FL 32792**FEI Number:** 59-3047042**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHRISS, LISA W MD
1925 MIZELL AVE
302
WINTER PARK, FL 32792 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:** LISA W CHRISS

03/12/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CEO
Name CHRISS, LISA DR.
Address 1925 MIZELL AVE, STE 302
City-State-Zip: WINTER PARK FL 32792

Title VP, COO
Name CHRISS, DON JR.
Address 1925 MIZELL AVE
STE 302
City-State-Zip: WINTER PARK FL 32792

Title DIRECTOR
Name CHRISS, LISA DR.
Address 3976 HUNTERS ISLE DR
City-State-Zip: ORLANDO FL 32837

Title DIRECTOR
Name DON, CHRISS JR.
Address 3976 HUNTERS ISLE DR
City-State-Zip: ORLANDO FL 32837

Title DIRECTOR
Name TYLER, CHRISS JAMES
Address 3976 HUNTERS ISLE DR
City-State-Zip: ORLANDO FL 32837

Title CFO
Name LISA, CHRISS DR.
Address 1925 MIZELL AVE.
SUITE 302
City-State-Zip: WINTER PARK FL 32792

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: LISA CHRISS

CEO

03/12/2021

Electronic Signature of Signing Officer/Director Detail

Date