

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S40901

Entity Name: WHITE CRANE CLINIC, INC.

Current Principal Place of Business:

114 E TARPON AVE #2
TARPON SPRINGS, FL 34689

Current Mailing Address:

114 E TARPON AVE #2
TARPON SPRINGS, FL 34689 US

FEI Number: 59-3056050

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SULLIVAN, KATHLEEN M
114 E TARPON AVE #2
TARPON SPRINGS, FL 34689 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 D
Name SULLIVAN, PATRICK S
Address 114 E TARPON AVE #2
City-State-Zip: TARPON SPRINGS FL 34689

Title D
Name SULLIVAN, KATHLEEN M
Address 114 E TARPON AVE #2
City-State-Zip: TARPON SPRINGS FL 34689

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: KATHLEEN SULLIVAN

REGISTERED AGENT

04/30/2021

Electronic Signature of Signing Officer/Director Detail

Date