## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F45747

Entity Name: CITRUS CARDIOLOGY CONSULTANTS, P.A.

**Current Principal Place of Business:** 

308 W. HIGHLAND BLVD INVERNESS, FL 34452

**Current Mailing Address:** 

308 W. HIGHLAND BLVD INVERNESS, FL 34452 US

FEI Number: 59-2123944 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STARK, STEPHEN H DR. 308 W. HIGHLAND BLVD INVERNESS, FL 34452 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: STEPHEN H. STARK 02/17/2015

Electronic Signature of Registered Agent

Date

**FILED** Feb 17, 2015

**Secretary of State** 

CC2888046439

Officer/Director Detail:

Title Title VΡ

WALKER, DENNIS J DR. TRIGO, GISELA DR. Name Name 308 W. HIGHLAND BLVD 308 W. HIGHLAND BLVD Address Address City-State-Zip: INVERNESS FL 34452 INVERNESS FL 34452 City-State-Zip:

VΡ Title Title VΡ

Name GONZALEZ, JAVIER M. DR. DELFIN, LUIS DR. Name Address 910 OLD CAMP ROAD

Address 308 W. HIGHLAND BLVD **BLDG 210** 

INVERNESS FL 34452 City-State-Zip: City-State-Zip: THE VILLAGES FL 32162

VΡ Title Title VP, SECRETARY

Name ATTANTI, SRINIVAS DR. Name MIRYALA, VINOD DR. 910 OLD CAMP ROAD Address

Address 910 OLD CAMP ROAD **BLDG 210** 

**BLDG 210** THE VILLAGES FL 32162

City-State-Zip: City-State-Zip: THE VILLAGES FL 32162

**PRESIDENT** Title Title ٧P

Name STARK, STEPHEN H. DR. Name KANNAM, HARI DR. Address 308 W. HIGHLAND BLVD Address 308 W. HIGHLAND BLVD City-State-Zip: INVERNESS FL 34452 INVERNESS FL 34452 City-State-Zip:

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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.

02/17/2015 SIGNATURE: STEPHEN H. STARK, MD **PRESIDENT** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title VP

Name SALUCK, BRIAN DR. Address 910 OLD CAMP ROAD

BLDG 210

City-State-Zip: THE VILLAGES FL 32162

Title VP

Name ANSARI, MOHAMMAD DR.
Address 308 W. HIGHLAND BLVD
City-State-Zip: INVERNESS FL 34452

Title VP

Name PASUPULETI, SUMAN DR.
Address 308 W. HIGHLAND BLVD
City-State-Zip: INVERNESS FL 34452

Title VP

Name RIVERO, ABEL DR.
Address 910 OLD CAMP ROAD

BLDG 210

City-State-Zip: THE VILLAGES FL 32162

Title VP

Name NERELLA, NISHANT K. DR.
Address 308 W. HIGHLAND BLVD
City-State-Zip: INVERNESS FL 34452