

**2022 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:**DELOACH, JERRALD W.  
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:** JERRALD W. DELOACH

04/06/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           GONZALEZ, JAVIER M. DR.  
Address        910 OLD CAMP ROAD  
                  BLDG 210  
City-State-Zip: THE VILLAGES FL 32162

Title            VP  
Name           ATTANTI, SRINIVAS DR.  
Address        910 OLD CAMP ROAD  
                  BLDG 210  
City-State-Zip: THE VILLAGES FL 32162

Title            VP  
Name           MIRYALA, VINOD DR.  
Address        910 OLD CAMP ROAD  
                  BLDG 210  
City-State-Zip: THE VILLAGES FL 32162

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

Title            VP  
Name           KANNAM, HARI DR.  
Address        308 W. HIGHLAND BLVD  
City-State-Zip: INVERNESS FL 34452

Title            VP  
Name           SALUCK, BRIAN DR.  
Address        910 OLD CAMP ROAD  
                  BLDG 210  
City-State-Zip: THE VILLAGES FL 32162

Title            VP  
Name           RIVERO, ABEL 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

**Continues on page 2**

*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:** JAVIER GONZALEZ

PRESIDENT

04/06/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

Title VP  
Name PRASHAD, RAKESH DR.  
Address 308 W. HIGHLAND BLVD  
City-State-Zip: INVERNESS FL 34452

Title VP  
Name BARAD, BHAVESH 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 TOPI, BERNARD DR.  
Address 308 W. HIGHLAND BLVD  
City-State-Zip: INVERNESS FL 34452