

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L03395

**FILED**  
**Jan 30, 2019**  
**Secretary of State**  
**3795331391CC**

**Entity Name:** ROBERT L. WATSON, M.D., P.A.

**Current Principal Place of Business:**

1704 SINGLE TREE WAY  
BOWLING GREEN, KY 42103-1546

**Current Mailing Address:**

1704 SINGLE TREE WAY  
BOWLING GREEN, KY 42103-1546 US

**FEI Number:** 59-2964667

**Certificate of Status Desired:** No

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

EVDEMON, LAURA  
10563 GREENCREST DR  
TAMPA, FL 33626 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 P  
Name WATSON, ROBERT L  
Address 1704 SINGLETREE WAY  
City-State-Zip: BOWLING GREEN KY 42103-1546

Title S  
Name TAYLOR, JOAN  
Address 1704 SINGLETREE WAY  
City-State-Zip: BOWING GREEN KY

*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:** ROBERT L WATSON M.D. P.A.

**PRESIDENT**

**01/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date