

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000031881

**Entity Name:** OAK PARK PROFESSIONAL CENTER, INC.

**Current Principal Place of Business:**

18501 MURDOCK CIRCLE  
SUITE 507  
PORT CHARLOTTE, FL 33948

**Current Mailing Address:**

18501 MURDOCK CIR  
SUITE 507  
PORT CHARLOTTE, FL 33948

**FEI Number:** 20-2496949

**Certificate of Status Desired:** Yes

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

TROMBLE, RICK A  
18501 MURDOCK CIRCLE  
SUITE 507  
PORT CHARLOTTE, FL 33948 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 PD  
Name TROMBLE, MICHELE L  
Address 18501 MURDOCK CIR- SUITE 507  
City-State-Zip: PORT CHARLOTTE FL 33948

Title VSTD  
Name TROMBLE, RICK A  
Address 18501 MURDOCK CIR- SUITE 507  
City-State-Zip: PORT CHARLOTTE FL 33948

*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:** RICK TROMBLE

**PRESIDENT**

**01/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date