

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V58206

Entity Name: FAMILY PHYSICIANS OF WINTER PARK, P.A.

Current Principal Place of Business:

6416 OLD WINTER GARDEN RD
ORLANDO, FL 32835

Current Mailing Address:

6416 OLD WINTER GARDEN RD
ORLANDO, FL 32835 US

FEI Number: 59-3164234

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RAILEY HARDING & ALLEN, P.A.
15 N EOLA DRIVE
ORLANDO, FL 32801 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 VYAS, INDRAJIT
Address 8616 WHISPERING WILLOW CT
City-State-Zip: ORLANDO FL 32835

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: INDRAJIT VYAS

CEO

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date