

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010974

Entity Name: LAKEWOOD RANCH MEDICAL CENTER MEDICAL STAFF, INC.

Current Principal Place of Business:

8330 LAKEWOOD RANCH BLVD.
LAKEWOOD RANCH, FL 34202

Current Mailing Address:

8330 LAKEWOOD RANCH BLVD.
LAKEWOOD RANCH, FL 34202

FEI Number: 46-4861050

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCCULLEN, JENNIFER
8330 LAKEWOOD RANCH BLVD.
LAKEWOOD RANCH, FL 34202 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: JENNIFER MCCULLEN

02/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title C
Name SUDBURY, AARON MD
Address 8330 LAKEWOOD RANCH BLVD.
City-State-Zip: LAKEWOOD RANCH FL 34202

Title VC
Name LAMAR, DANIEL MD
Address 8330 LAKEWOOD RANCH BLVD.
City-State-Zip: LAKEWOOD RANCH FL 34202

Title S/T
Name MCCULLEN, JENNIFER MD
Address 8330 LAKEWOOD RANCH BLVD.
City-State-Zip: LAKEWOOD RANCH FL 34202

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER MCCULLEN

SECRETARY/TREASURER 02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date