#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000010974

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

FILED
Mar 10, 2015
Secretary of State
CC4208313823

# **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:

FRIAS, FEDERICO 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title C Title VC

Name SUDBURY, AARON MD Name LAMAR, DANIEL MD

Address 8330 LAKEWOOD RANCH BLVD. Address 8330 LAKEWOOD RANCH BLVD.

City-State-Zip: LAKEWOOD RANCH FL 34202 City-State-Zip: LAKEWOOD RANCH FL 34202

Title S/T

Name FRIAS, FEDERICO 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: FEDERICO FRIAS, MD

SECRETARY/TREASURER 03/10/2015

Electronic Signature of Signing Officer/Director Detail

Date