

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L00000016177

Entity Name: ANESTHESIA ASSOCIATES OF SOUTHWEST FLORIDA, LLC

Current Principal Place of Business:

1220 E VENICE AVENUE
VENICE, FL 34285

Current Mailing Address:

1220 E VENICE AVENUE
VENICE, FL 34285

FEI Number: 65-1071498

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KONDAPALLI, RAVI
825 VENETIAN PARKWAY
VENICE, FL 34285 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	FELMAN, ROBERT	Name	DUMAS, PETER
Address	1041 RIDGEWOOD AVE	Address	825 VENETIAN PARKWAY
City-State-Zip:	VENICE FL 34285	City-State-Zip:	VENICE FL 34285
Title	MGR		
Name	KONDAPALLI, RAVI		
Address	825 VENETIAN PARKWAY		
City-State-Zip:	VENICE FL 34285		

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAVI KONDAPALLI

MGR

11/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date