

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008649

Entity Name: OB/GYN SPECIALISTS PROPERTY, LLC**Current Principal Place of Business:**770 NORTHPOINT PARKWAY
STE 102
WEST PALM BEACH, FL 33407**Current Mailing Address:**770 NORTHPOINT PARKWAY
STE 102
WEST PALM BEACH, FL 33407 US**FEI Number:** 04-3753686**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURIGO, JOHN
770 NORTHPOINT PARKWAY
STE 102
WEST PALM BEACH, FL 33407 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
Name	BURIGO, JOHN
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED MEMBER
Name	FISHMAN, LOEL MD
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED MEMBER
Name	MOREL, MARIE
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED MEMBER
Name	BANOONI, AMY
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	MGR
Name	GORDON, ROBERT
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED MEMBER
Name	JONES, DEBRA
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED MEMBER
Name	WESTON, LAURA
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

Title	AUTHORIZED MEMBER
Name	TUNG, CHIA-LING
Address	2979 PGA BLVD, #200
City-State-Zip:	PALM BEACH GARDENS FL 33410

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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: JOHN BURIGO

MGR

01/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED MEMBER
Name IANNACCONE, VICTOR
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AUTHORIZED MEMBER
Name FERN, STEVEN
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AUTHORIZED MEMBER
Name PASS, JULIE
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AUTHORIZED MEMBER
Name MELENDY, SASHA
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AUTHORIZED MEMBER
Name CARLSON, MELISSA
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title AUTHORIZED MEMBER
Name FALZONE, SAMUEL
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410