2019 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:

Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title Title MGR MGR

Name BURIGO, JOHN Name GORDON, ROBERT

770 NORTHPOINT PARKWAY 770 NORTHPOINT PARKWAY Address Address

STE 102 STE 102

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

Title **AUTHORIZED MEMBER** Title AUTHORIZED MEMBER

Name FISHMAN, LOEL MD Name JONES, DEBRA

Address 770 NORTHPOINT PARKWAY Address 770 NORTHPOINT PARKWAY

STE 102 STE 102

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

AUTHORIZED MEMBER Title Title **AUTHORIZED MEMBER**

MOREL, MARIE WESTON, LAURA Name Name

770 NORTHPOINT PARKWAY 770 NORTHPOINT PARKWAY Address Address

STE 102 STE 102

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407

AUTHORIZED MEMBER Title AUTHORIZED MEMBER Title

Name BANOONI, AMY Name TUNG, CHIA-LING

Address 770 NORTHPOINT PARKWAY Address 770 NORTHPOINT PARKWAY **STE 102**

STF 102

WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 City-State-Zip: City-State-Zip:

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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** 01/02/2019

FILED Jan 02, 2019

Secretary of State

CC6878511049

Authorized Person(s) Detail Continued:

AUTHORIZED MEMBER Title Title **AUTHORIZED MEMBER** IANNACCONE, VICTOR MELENDY, SASHA Name Name

Address 770 NORTHPOINT PARKWAY Address 770 NORTHPOINT PARKWAY STE 102

STE 102

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip:

WEST PALM BEACH FL 33407

AUTHORIZED MEMBER Title **AUTHORIZED MEMBER** Title Name FERN, STEVEN Name CARLSON, MELISSA

Address 770 NORTHPOINT PARKWAY Address 770 NORTHPOINT PARKWAY

STE 102 STE 102

WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 City-State-Zip: City-State-Zip:

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER**

PASS, JULIE Name FALZONE, SAMUEL Name

Address 770 NORTHPOINT PARKWAY Address 770 NORTHPOINT PARKWAY STE 102

STE 102

WEST PALM BEACH FL 33407 City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip:

Title **MANAGER**

Address

Name WINTERROWD, SAMANTHA

> 770 NORTHPOINT PARKWAY STE 102

WEST PALM BEACH FL 33407 City-State-Zip: