## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019066

Entity Name: CADUCEUS PROPERTIES, LLC

**Current Principal Place of Business:** 

1401 CENTERVILLE ROAD, SUITE 300

TALLAHASSEE, FL 32308

**Current Mailing Address:** 

1401 CENTERVILLE ROAD, SUITE 300 TALLAHASSEE. FL 32308

FEI Number: 03-0519350 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THAXTON, LINDSAY 1401 CENTERVILLE ROAD, SUITE 300 TALLAHASSEE, FL 32308 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: LINDSAY THAXTON 04/09/2019

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name RACOON LOVE, LLC Name HEALTH VENTURES PAIN MGNT.,LLC

Address 464 SUDOETH AVE Address 1401 CENTERVILLE RD ,BOX 210

City-State-Zip: PANAMA CITY FL 32401 City-State-Zip: TALLAHASSEE FL 32308

Title MGR Title MGR

Name SOLAR ASSETS ,LLC Name MFJF, LLC

Address 1826 ATLANTIS PLACE Address 4571 HEDGEWOOD DR

City-State-Zip: TALLAHASSEE FL 32303 City-State-Zip: TALLAHASSEE FL 32309

Title MGR

Name SCOTTY DOG, LLC
Address 2781 SWEET RIDGE ST
City-State-Zip: TALLAHASSEE FL 32308

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: LINDSAY THAXTON MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

04/09/2019 Date

FILED Apr 09, 2019

**Secretary of State** 

1486025452CC

Date