#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000008033

Entity Name: ALL WOMEN'S HEALTH OBSTETRICS AND GYNECOLOGY

ASSOCIATES LLC

# **Current Principal Place of Business:**

4910 NE 27TH AVENUE LIGHTHOUSE POINT, FL 33064

## **Current Mailing Address:**

4910 NE 27TH AVENUE LIGHTHOUSE POINT, FL 33064

FEI Number: 80-0104441 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

THOMAS C. WALSER, P.A. 4800 NORTH FEDERAL HIGHWAY, BLDG D SANCTUARY CENTER, SUITE 108 BOCA RATON, FL 33431 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

FILED Mar 08, 2015

**Secretary of State** 

CC1215761934

### Authorized Person(s) Detail:

Title MGRM

Name POTT-GRINSTEIN, ELISABETH ADR.

Address 4910 NE 27TH AVENUE

City-State-Zip: LIGHTHOUSE POINT FL 33064

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: ELISABETH POTT-GRINSTEIN

03/08/2015