

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021570

Entity Name: LAKEWOOD RANCH MINIMALLY INVASIVE SURGERY, PLLC

Current Principal Place of Business:

8340 LAKEWOOD RANCH BOULEVARD
SUITE 101
BRADENTON, FL 34202

Current Mailing Address:

8340 LAKEWOOD RANCH BOULEVARD
SUITE 101
BRADENTON, FL 34202 US

FEI Number: 20-0801939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NAPOLIELLO, DAVID A
8340 LAKEWOOD RANCH BOULEVARD
SUITE 101
BRADENTON, FL 34202 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	DR.	Title	MGR.
Name	NAPOLIELLO, DAVID A	Name	NAPOLIELLO, DIANA R
Address	8340 LAKEWOOD RANCH BOULEVARD, SUITE 101	Address	8340 LAKEWOOD RANCH BOULEVARD, SUITE 101
City-State-Zip:	BRADENTON FL 34202	City-State-Zip:	BRADENTON FL 34202

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: DIANA NAPOLIELLO

PRACTICE MANAGER

02/19/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date