## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000079057

Entity Name: 7545-7547 MEDICAL DRIVE, L.L.C.

**Current Principal Place of Business:** 

7545 MEDICAL DRIVE HUDSON, FL 34667

**Current Mailing Address:** 

7545 MEDICAL DRIVE HUDSON, FL 34667

FEI Number: 59-3826451 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DICKENS, MARK 7320 E. FLETCHER AVENUE TAMPA, FL 33637 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 Feb 23, 2016

**Secretary of State** 

CC6155894514

Authorized Person(s) Detail:

Title MGR Title MGR

NamePASCUAL, JOSE FNameSORRESSO, DOMENICK JAddress7545 MEDICAL DRIVEAddress7545 MEDICAL DRIVECity-State-Zip:HUDSON FL 34667City-State-Zip:HUDSON FL 34667

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: JOSE F. PASCUAL

**MGR** 

02/23/2016