### 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: MICHELLE DETWEILER

TREASURER

04/29/2024 Date

# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L05000099048

Entity Name: FLORIDA FOOT & ANKLE ASSOCIATES, LLC

# **Current Principal Place of Business:**

8200 NW 27 STREET SUITE 108 DORAL, FL 33122

# **Current Mailing Address:**

8200 NW 27 STREET SUITE 108 DORAL, FL 33122 US

# FEI Number: 14-1941024

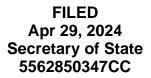
# Name and Address of Current Registered Agent:

SEDA, RICHARD L DR. 8200 NW 27 STREET SUITE 108 DORAL, FL 33122 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	E: RICHARD L. SEDA			04/29/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	SECRETARY	Title	PRESIDENT	
Name	RINGLER, ADAM DR.	Name	SEDA, RICHARD L DPM	
Address	8200 NW 27 STREET SUITE 108	Address	8200 NW 27 STREET SUITE 108	
City-State-Zip:	DORAL FL 33122	City-State-Zip:	DORAL FL 33122	
Title	TREASURER			
Name	DETWEILER, MICHELLE DPM			
Address	8200 NW 27 STREET, #108			
City-State-Zip:	DORAL FL 33122			

Certificate of Status Desired: No



Electronic Signature of Signing Authorized Person(s) Detail