## 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000023074

Entity Name: NETCONNECT HEALTHCARE SYSTEMS, LLC

FILED
Mar 15, 2021
Secretary of State
2042326191CC

## **Current Principal Place of Business:**

204 37TH AVE N #101

ST. PETERSBURG, FL 33704

## **Current Mailing Address:**

204 37TH AVE N#101

ST. PETERSBURG, FL 33704 US

FEI Number: 20-4571256 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JENNER, CHERYL A 211 20TH AVE N ST. PETERSBURG, FL 33704 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: CHERYL A. JENNER 03/15/2021

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGMR Title PRESIDENT

NameJENNER, CHERYL APNameJENNER, GEORDIEAddress211 20TH AVE NAddress211 20TH AVE N

City-State-Zip: ST. PETERSBURG FL 33704 City-State-Zip: ST. PETERSBURG FL 33704

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: CHERYL JENNER MGMR