

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047668

Entity Name: CENTRAL FLORIDA HOLDING, LLC

Current Principal Place of Business:

2111 SW 20TH PLACE
OCALA, FL 34471

Current Mailing Address:

2111 SW 20TH PLACE
OCALA, FL 34471

FEI Number: 20-4841143

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARDLOW, RANDY
2111 SW 20TH PLACE
OCALA, FL 34471 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 MGRM
Name ELIGETI, RAMULU MD
Address 2111 SW 20TH PLACE
City-State-Zip: Ocala FL 34471

Title MGMR
Name KOKA, VIJAYA MD
Address 2111 SW 20TH PLACE
City-State-Zip: Ocala FL 34471

Title MGMR
Name RAO, SRISHA MD
Address 2111 SW 20TH PLACE
City-State-Zip: Ocala FL 34471

Title MGMR
Name GUMMADI, SIVA MD
Address 2111 SW 20TH PLACE
City-State-Zip: Ocala FL 34471

Title MEMBER
Name MIKKILINENI, HIMA M.D.
Address 2111 SW 20TH PLACE
City-State-Zip: Ocala FL 34471

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: SIVA GUMMADI, M.D.

MGMR

04/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date