

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049156

Entity Name: FLORIDA LAKES SURGICAL, PLLC

Current Principal Place of Business:

4759 LAKEVIEW DRIVE
SEBRING, FL 33870

Current Mailing Address:

4759 LAKEVIEW DRIVE
SEBRING, FL 33870 US

FEI Number: 20-8995750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LACKEY, THOMAS C II
4759 LAKEVIEW DRIVE
SEBRING, FL 33870 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 MGR
Name LACKEY, THOMAS C II
Address 4759 LAKEVIEW DRIVE
City-State-Zip: SEBRING FL 33870

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: THOMAS LACKEY

MGR

06/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date