

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000024521

Entity Name: APOLLO MEDICAL SERVICES, LLC

Current Principal Place of Business:

419 APOLLO BEACH BLVD
APOLLO BEACH, FL 33572

Current Mailing Address:

419 APOLLO BEACH BLVD
APOLLO BEACH, FL 33572 US

FEI Number: 26-2102184

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, WILLIAM CHARLES
1002 SONATA LANE
APOLLO BEACH, FL 33572 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: WILLIAM C. WILLIAMS

01/15/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name WILLIAMS, BILL
Address 1002 SONATA LN
City-State-Zip: APOLLO BEACH FL 33572

Title MGRM
Name RANKIN, LLC
Address 1006 SYMPHONY ISLES BLVD
City-State-Zip: APOLLO BEACH FL 33572

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: WILLIAM CHARLES WILLIAMS

OWNER

01/15/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date