## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000057843

Entity Name: EAST ORLANDO MANAGEMENT GROUP, LLC

**FILED** Apr 24, 2017 **Secretary of State** CC7631256444

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

258 SOUTH CHICKASAW TRAIL

100

ORLANDO, FL 32825

## **Current Mailing Address:**

258 SOUTH CHICKASAW TRAIL

100

ORLANDO, FL 32825 US

FEI Number: 27-0761345 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DOBKIN, STEPHEN F. 258 SOUTH CHICKASAW TRAIL 100

ORLANDO, FL 32825 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: STEPHEN F. DOBKIN 04/24/2017

> Date Electronic Signature of Registered Agent

> > 100

258 SOUTH CHICKASAW TRAIL

Authorized Person(s) Detail:

100

100

City-State-Zip:

Title **MGRM** Title **MGRM** 

Name DOBKIN, STEPHEN Name BAIG, AJMAL ALI

258 SOUTH CHICKASAW TRAIL 258 SOUTH CHICKASAW TRAIL Address Address

ORLANDO FL 32825 City-State-Zip: ORLANDO FL 32825

Title **MGRM** Title **MGRM** 

Name PATEL, ZAMIP Name JOSEPH L. RILEY ANESTHESIA

ASSOCIATES, P.A. Address 258 SOUTH CHICKASAW TRAIL

851 TRAFALGAR COURT Address 100

SUITE 200E ORLANDO FL 32825

City-State-Zip: MAITLAND FL 32751 City-State-Zip:

Title MGRM Title **MGRM** 

AGUDELO-RIVERA, JUAN Name SHAIKH, ANIQ Name

258 SOUTH CHICKASAW TRAIL Address 258 SOUTH CHICKASAW TRAIL Address 100

City-State-Zip: ORLANDO FL 32825 City-State-Zip: ORLANDO FL 32825

Title MANAGER Title **MANAGER** 

Name PEREZ. JAVIER A.

Name MOORE, KEITH R. Address 258 SOUTH CHICKASAW TRAIL

100

ORLANDO FL 32825 City-State-Zip:

City-State-Zip: ORLANDO FL 32825

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.

Address

04/24/2017 SIGNATURE: STEPHEN F. DOBKIN **MANAGER**