

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000057843

Entity Name: EAST ORLANDO MANAGEMENT GROUP, LLC**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

04/24/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name DOBKIN, STEPHEN
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

Title MGRM
Name JOSEPH L. RILEY ANESTHESIA
ASSOCIATES, P.A.
Address 851 TRAFALGAR COURT
SUITE 200E
City-State-Zip: MAITLAND FL 32751

Title MANAGER
Name PEREZ, JAVIER A.
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

Title MANAGER
Name BIBLIOWICZ, MICHAEL
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

Title MGRM
Name PATEL, ZAMIP
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

Title MGRM
Name SHAIKH, ANIQ
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

Title MANAGER
Name MOORE, KEITH R.
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

Title MANAGER
Name HARRINGTON, DALE C.
Address 258 SOUTH CHICKASAW TRAIL
100
City-State-Zip: ORLANDO FL 32825

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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: STEPHEN F. DOBKIN

MANAGER

04/24/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MANAGER
Name RABAJA, DAVID
Address 258 SOUTH CHICKASAW TRAIL
 100
City-State-Zip: ORLANDO FL 32825

Title MANAGER
Name WAIZENNEGGER, LISA J.
Address 258 SOUTH CHICKASAW TRAIL
 100
City-State-Zip: ORLANDO FL 32825