

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000071781

**Entity Name:** KAREN E. RYBAK LEGAL NURSE CONSULTING, LLC

**Current Principal Place of Business:**

9625 SW 19TH AVENUE  
GAINESVILLE, FL 32607

**Current Mailing Address:**

5745 SW 75TH STREET  
348  
GAINESVILLE, FL 32608

**FEI Number:** 27-0678216

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

BLEDSON, NORMAN SESQ  
527 EAST UNIVERSITY AVENUE  
GAINESVILLE, FL 32602 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 RYBAK, KAREN  
Address 9625 SW 19TH AVENUE  
City-State-Zip: GAINESVILLE FL 32607

*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:** KAREN RYBAK

MGRM

04/03/2015

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date