

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000009928

Entity Name: SHANGO ONE, LLC

Current Principal Place of Business:

KURTELL MEDICAL CENTER
777 37TH STREET SUITE A 103
VERO BEACH, FL 32960

Current Mailing Address:

KURTELL MEDICAL CENTER
777 37TH STREET SUITE A 103
VERO BEACH, FL 32960 US

FEI Number: 27-3627295

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALLACH, KURT L
5230 ST. ANDREWS ISLAND DRIVE
VERO BEACH, FL 32967 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: KURT L. WALLACH

05/01/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name WALLACH, KURT L
Address 5230 ST. ANDREWS ISLAND DRIVE
City-State-Zip: VERO BEACH FL 32967

Title MANAGER
Name WALLACH, MARILYN G
Address 5230 ST. ANDREWS ISLAND DRIVE
City-State-Zip: VERO BEACH FL 32967

Title MANAGER
Name WALLACH, MARK J
Address 501 44TH AVENUE SW
City-State-Zip: VERO BEACH FL 32968

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: WALLACH, KURT L

MANAGER

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date