

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000122930

Entity Name: ORLANDO FAMILY PHYSICIANS, LLC

Current Principal Place of Business:

121 SOUTH ORANGE AVE.
SUITE 940
ORLANDO, FL 32801

Current Mailing Address:

121 SOUTH ORANGE AVE.
SUITE 940
ORLANDO, FL 32801

FEI Number: 59-3635929

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, JORGE L
121 SOUTH ORANGE AVE.
SUITE 940
ORLANDO, FL 32801 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 MGR
Name GARCIA, JORGE L
Address 121 SOUTH ORANGE AVE.
City-State-Zip: ORLANDO FL 32801

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: JORGE L. GARCIA

MGR

04/07/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date