## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000033411

**Current Principal Place of Business:** 

Entity Name: SUNRISE MEDICAL GROUP V, L.L.C.

inty Name. SONNISE MEDICAL GROOF V, E.E.

1445 ROSS AVENUE SUITE 1400 DALLAS, TX 75202 FILED
Apr 14, 2014
Secretary of State
CC0390034867

## **Current Mailing Address:**

1445 ROSS AVENUE SUITE 1400 DALLAS, TX 75202 US

FEI Number: 45-0891515 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Title MGRM

Name TENET FLORIDA Name SEC OF, KRISTINA MACK

PHYSICIANSERVICESLLC
Address 1445 ROSS AVENUE

Address 1445 ROSS AVE City-State-Zip: DALLAS TX 75202

City-State-Zip: DALLAS TX 75202

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: KRISTINA MACK SEC OF

**MGMR** 

04/14/2014