

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000095224

Entity Name: MEDICAL KNOWLEDGE CONSULTANTS, LLC

Current Principal Place of Business:

511 BAYSHORE DRIVE
#611
FT. LAUDERDALE, FL 33304

Current Mailing Address:

511 BAYSHORE DRIVE
#611
FT. LAUDERDALE, FL 33304 US

FEI Number: 26-2197827

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MANAGER
Name MATHERS, FRANK G. DR.
Address 511 BAYSHORE DRIVE
 611
City-State-Zip: FT. LAUDERDALE FL 33304

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: DR. FRANK G. MATHERS

MANAGER

01/10/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date