

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000117370

Entity Name: BAY AREA WOMEN'S CARE OF CLEARWATER, LLC

Current Principal Place of Business:

3190 MCMULLEN BOOTH RD
STE 200
CLEARWATER, FL 33761

Current Mailing Address:

3731 FAU BLVD
STE 1
BOCA RATON, FL 33431 US

FEI Number: 45-4039627

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KONSKER, KENNETH A
3731 FAU BLVD
STE 1
BOCA RATON, FL 33431 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 FLORIDA WOMAN CARE, LLC
Address 3731 FAU BLVD
STE 1
City-State-Zip: BOCA RATON FL 33431

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: GAVIN MA

04/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date