

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000157007

Entity Name: OBGYN SPECIALISTS OF LAKESIDE, LLC**Current Principal Place of Business:**770 NORTHPOINT PARKWAY
SUITE 102
WEST PALM BEACH, FL 33407**Current Mailing Address:**770 NORTHPOINT PARKWAY
SUITE 102
WEST PALM BEACH, FL 33407 US**FEI Number:** 46-1588640**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURIGO, JOHN
770 NORTHPOINT PARKWAY
SUITE 102
WEST PALM BEACH, FL 33407 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 BURIGO, JOHN
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGRM
Name FISHMAN, LOEL
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MEMBER
Name BANOONI, AMY
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MEMBER
Name FERN, STEVEN
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGRM
Name GORDON, ROBERT
Address 2979 PGA BLVD, STE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MGRM
Name CARLSON, MELISSA
Address 2979 PGA BLVD, #200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MEMBER
Name IANNACCONE, VICTOR
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MEMBER
Name PASS, JULIE
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

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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: JOHN BURIGO

MGR

01/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MEMBER
Name FALZONE, SAMUEL
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MEMBER
Name MOREL, MARIE
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MANAGER
Name TUNG, CHIA-LING
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MEMBER
Name JONES, DEBRA
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410

Title MANAGER
Name MELENDY, SASHA DR.
Address 2979 PGA BLVD
SUITE 200
City-State-Zip: PALM BEACH GARDENS FL 33410