

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000048254

**Entity Name:** DIANA PETERS, RN UTILIZATION REVIEW AUDITOR, LLC

**Current Principal Place of Business:**

1048 TEVIS STREET, SE  
PALM BAY, FL 32909

**Current Mailing Address:**

1048 TEVIS STREET, SE  
PALM BAY, FL 32909 US

**FEI Number:** 46-2428960

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PETERS, DIANA E  
1048 TEVIS STREET, SE  
PALM BAY, FL 32909 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 PETERS, DIANA E  
Address 1048 TEVIS STREET, SE  
City-State-Zip: PALM BAY FL 32909

*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:** DIANA E PETERS MANAGER OWNER

**REGISTERED NURSE**

**04/22/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date