

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000081857

**Entity Name:** REEDER MEDICAL GROUP LLC

**Current Principal Place of Business:**

1130 BAYVIEW DRIVE  
FT LAUDERDALE, FL 33304

**Current Mailing Address:**

1130 BAYVIEW DRIVE  
FT LAUDERDALE, FL 33304 US

**FEI Number:** 27-3353931

**Certificate of Status Desired:** No

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

PALMER, ANDREW J.  
5353 NORTH FEDERAL HIGHWAY  
SUITE 402  
FT LAUDERDALE, FL 33308 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:** ANDREW J. PALMER

04/30/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	ROBERT L REEDER LIVING TRUST	Name	REEDER, ROBERT DAMIAN
Address	1400 S. ANDREWS AVE.	Address	1400 S. ANDREWS AVE.
City-State-Zip:	FT LAUDERDALE FL 33316	City-State-Zip:	FT LAUDERDALE FL 33316

*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:** ROBERT REEDER

MANAGER

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date