

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000059313

Entity Name: NATIONAL MEDICAL VENTURES, LLC

Current Principal Place of Business:

678 SCARLET OAK CR #102
ALT SPGS , FL 32701

Current Mailing Address:

678 SCARLET OAK CR #102
ALT SPGS , FL 32701 US

FEI Number: 46-5211824

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRENNER, LINDA
678 SCARLET OAK CR #102
ALT SPGS , FL 32701 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 AMBR
Name BRENNER, EDWARD
Address 678 SCARLET OAK CR #102
City-State-Zip: ALT SPGS FL 32701

Title AMBR
Name BRENNER, MARC
Address 678 SCARLET OAK CR #102
City-State-Zip: ALT SPGS FL 32701

Title AMBR
Name BRENNER, DAVID
Address 678 SCARLET OAK CR #102
City-State-Zip: ALT SPGS FL 32701

Title AMBR
Name WAGNER, SUSAN
Address 678 SCARLET OAK CR #102
City-State-Zip: ALT SPGS FL 32701

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: MARC BRENNER

MGR

04/15/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date