

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000135305

Entity Name: LILY MEDICAL, LLC

Current Principal Place of Business:

7680 UNIVERSAL BOULEVARD, SUITE 575
ORLANDO, FL 32819

Current Mailing Address:

7680 UNIVERSAL BOULEVARD, SUITE 575
ORLANDO, FL 32819 US

FEI Number: 47-1713943

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, SCOTT E ESQ.
111 N. ORANGE AVENUE, SUITE 900
ORLANDO, FL 32801 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 MGR
Name TOMASSI, PATRICK
Address 4226 ISLE VISTA AVENUE
City-State-Zip: BELLE ISLE FL 32812

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: PATRICK TOMASSI

MANAGER

02/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date