

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000164516

**Entity Name:** IC JACKSONVILLE MEDICAL GP, LLC

**Current Principal Place of Business:**

17130 DALLAS PARWAY, STE 240  
DALLAS, TX 75248

**Current Mailing Address:**

17130 DALLAS PARWAY, STE 240  
DALLAS, TX 75248

**FEI Number:** 47-2182004

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** MADONNA CUDDIHY

01/13/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name HEPFER, CHRISTIANE  
Address 17130 DALLAS PARWAY, STE 240  
City-State-Zip: DALLAS TX 75248

Title MGR  
Name HEPFER, CHRISTIANE  
Address 17130 DALLAS PARWAY, STE 240  
City-State-Zip: DALLAS TX 75248

*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:** CHRISTIANE HEPFER

AMBR

01/13/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date