

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000107590

**Entity Name:** SG ADVANCED NURSING PRACTICE, LLC

**Current Principal Place of Business:**

1624 NE 1ST STREET

1

FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

1624 NE 1ST STREET

1

FORT LAUDERDALE, FL 33301 US

**FEI Number:** 47-4458946

**Certificate of Status Desired:** No

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

GLEESON, SUSANNAH

1624 NE 1ST STREET

1

FORT LAUDERDALE, FL 33301 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:** SUSANNAH GLEESON

03/14/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM

Name GLEESON, SUSANNAH

Address 1624 NE 1ST STREET

1

City-State-Zip: FORT LAUDERDALE FL 33301

*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:** SUSANNAH GLEESON

03/14/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date